Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 1 of 53

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (If known):

Chapter you are filing under:

Chapter 7

Chapter 11

Chapter 12

Chapter 13

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

JUL 1 4 2017

JEFFREY P. ALLSTEADT, CLERK
INTAKE 1

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	IT (B) Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		•
	Write the name that is on your government-issued picture	Cynthia First name	
	identification (for example, your driver's license or passport).	Irene Middle name	First name
	Bring your picture	Porter Last name	Middle name
	identification to your meeting with the trustee.		Last name
me fuata.		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	First name	
	years	rischame	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
No sie to			
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>1</u> <u>0</u> <u>7</u> <u>6</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 2 of 53

Deb	otor 1 Cynthia I.	Porter	Construction ::
	First Name Middle I	Name Last Name	Case number (# inown)
e seemet me			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
			•
	Any business names	rm ys	
	and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers		
	(EIN) you have used in		
	the last 8 years	Business name	Business name
	Include trade names and		
	doing business as names	Desire	
		Business name	Business name
		EIN	EIN
			\mathbb{A}
		EIN	FIN
			EIN
DESCRIPTION OF THE PROPERTY OF		A STATE OF THE PROPERTY OF THE	
	The state of the s		
5. 1	Where you live		If Debtor 2 lives at a different address:
			Postor 2 mes at a different address.
		17718 Rosewood Dr.	
		Number Street	Number Street
		Apt. 1B	
		VIII.0	
		Lansing IL 60438	
		Lansing IL 60438 City State ZIP Code	City State ZIP Code
		2 3343	City State ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one	If Debtor 2's mailing address is different from
		above, fill it in here. Note that the court will send any notices to you at this mailing address.	yours, fill it in here. Note that the court will send any notices to this mailing address.
		any notices to you at this maining address.	any notices to this maining address.
			•
		Number Street	Number Street
		Number Steet	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	
		City State ZIP Code	City State ZIP Code
X 0000000 A 150.AS	TO A PORT OF THE PORT OF A CONTROL OF A CONTROL OF THE PORT OF THE PORT OF THE PORT OF A CONTROL		
		and the second of the second o	
5. V	Why you are choosing	Check one:	Check one:
	his district to file for	Over the last 180 days before filing this petition,	D 0
b	ankruptcy	I have lived in this district longer than in any	Over the last 180 days before filing this petition, I have lived in this district longer than in any
		other district.	other district.
		I have another reason. Explain.	☐ I have another reason. Explain.
		(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)
			4444

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 3 of 53

ebtor 1 <u>CVNINIA I.</u> First Name Middle		Porter Last Name			Case number (if i	(покл)	
abbiton or a service and							
art 24 Tell the Court Ab	out Your I	Bankruptcy	/ Case				
The chapter of the Bankruptcy Code you	Check of for Bank	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
are choosing to file under	🗹 Cha	pter 7					
	🗖 Cha	pter 11					
	☐ Cha	pter 12					
The state of the	☐ Cha	pter 13	emperatoriante a mongret 1996 de Legando I provincia proporça como con construir de la companya de companya de				
How you will pay the fee	loca you sub with	☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the					
	2 I red By la less pay	uest that naw, a judge than 150% the fee in in	ny fee be waived (You may, but is not require of the official poverty li	may d to, v ne th	request this opt waive your fee, a at applies to you nis option, you m	ion only if you are filing for Chapter 7, and may do so only if your income is r family size and you are unable to ust fill out the Application to Have the with your petition.	
Have you filed for bankruptcy within the	☑ No						
last 8 years?	Yes.	District	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	When	MM / DD / YYYY	Case number	
		District				Case number	
		District					
		District		When	MM / DD / YYYY	Case number	
Are any bankruptcy	⊿ No	The second secon		de gande men de prinsper magana, p			
cases pending or being filed by a spouse who is	☐ Yes.	Debtor				Relationship to you	
not filing this case with you, or by a business partner, or by an affiliate?		District		Nhen	MM / DD / YYYY	Case number, if known	
annate:		Debtor				Relationship to you	
		District	V	∕∕hen		Case number, if known	
Do you rent your residence?	☐ No. ☑ Yes.	Go to line 12 Has your lar residence?		າ judg	ment against you a	and do you want to stay in your	
				ıt an E	Eviction Judgment	Against You (Form 101A) and file it with	

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 4 of 53

Debtor 1 Cynthia I. First Name Middle N	Porter Last Name	Case number (if known)
art 53 Report About Any	Businesses You Own as a Sol	le Proprietor
Are you a sole proprietor of any full- or part-time		
business?	Yes. Name and location of bus	siness
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or	Name of business, if any Number Street	
LLC. If you have more than one	, tombot off cot	
sole proprietorship, use a separate sheet and attach it		
to this petition.	City	
	Ony	State ZIP Code
	Check the appropriate bo	ox to describe your business:
	Health Care Business	s (as defined in 11 U.S.C. § 101(27A))
	☐ Single Asset Real Est	tate (as defined in 11 U.S.C. § 101(51B))
	Stockbroker (as defin	ed in 11 U.S.C. § 101(53A))
	Commodity Broker (a	s defined in 11 U.S.C. § 101(6))
	None of the above	
Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	most recent balance sheet, statem any of these documents do not exi	ou indicate that you are a small business debtor, you must attach your nent of operations, cash-flow statement, and federal income tax return or if ist, follow the procedure in 11 U.S.C. § 1116(1)(B). oter 11. 11, but I am NOT a small business debtor according to the definition in
	Yes. I am filing under Chapter Bankruptcy Code.	11 and I am a small business debtor according to the definition in the
art 4: Report if You Own	or Have Any Hazardous Prope	erty or Any Property That Needs Immediate Attention
Do you own or have any property that poses or is	🛭 No	
alleged to pose a threat	Yes. What is the hazard?	
of imminent and identifiable hazard to public health or safety? Or do you own any	-	
immediate attention? For example, do you own	If immediate attention is	needed, why is it needed?
perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	- 	
	Where is the property?	Number Street
	-	
	ā	City State ZIP Code

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 5 of 53

Debtor 1	Cynthia I. First Name Middle M	<u>Porter</u>		Case nun	nber (if known)		
Part 5:	 -	200					-
r an C.	Explain Tour Enoi		riefing About Credit Counselin	g			
	e court whether ave received a	About Debtor 1:		At	out Debtor 2 (8	Spouse Only in a Joint Case):	
briefin	g about credit	You must check o	ne:	Yo	ou must check o	ne:	
receive	requires that you a briefing about credit ling before you file for	counseling ag filed this bank certificate of d			counseling ag	riefing from an approved credit gency within the 180 days befor truptcy petition, and I received completion.	re I
bankruj truthfull	otcy. You must y check one of the	Attach a copy of plan, if any, that	of the certificate and the payment at you developed with the agency.		Attach a copy of	of the certificate and the payment at you developed with the agency	
cannot eligible		counseling ag filed this bank certificate of c			I received a br counseling ag	iefing from an approved credit lency within the 180 days befor ruptcy petition, but I do not ha	e I
can dist will lose you paid	file anyway, the court ismiss your case, you se whatever filing fee aid, and your creditors egin collection activities	Within 14 days you MUST file : plan, if any.	at I asked for credit counseling om an approved agency, but was obtain those services during the 7 I made my request, and exigent nces merit a 30-day temporary waiver		Within 14 days you MUST file a plan, if any.	ys after you file this bankruptcy petition le a copy of the certificate and paymer. I asked for credit counseling m an approved agency, but was otain those services during the 7 made my request, and exigent these merit a 30-day temporary waiver	
can beg again.		services from unable to obta days after I ma			unable to obta days after I ma		
		requirement, at what efforts you you were unabl	day temporary waiver of the tach a separate sheet explaining a made to obtain the briefing, why e to obtain it before you filed for a what exigent circumstances file this case.	ering, why what efforts you made to obtain it lied for you were unable to obtain it was		lach a separate sheet explaining I made to obtain the briefing, why e to obtain it before you filed for I what exigent circumstances	,
		dissatisfied with	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		Your case may dissatisfied with	be dismissed if the court is your reasons for not receiving a you filed for bankruptcy.	
		still receive a br You must file a agency, along w developed, if an			If the court is sa still receive a bri You must file a d agency, along w	is satisfied with your reasons, you must a briefing within 30 days after you file. e a certificate from the approved ing with a copy of the payment plan you if any. If you do not do so, your case	
		only for cause a			Any extension o		
		l am not require credit counseli	ed to receive a briefing about ng because of:		am not require	ed to receive a briefing about ng because of:	i
		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	· [☐ Incapacity.	I have a mental illness or a mer deficiency that makes me incapable of realizing or making rational decisions about finance	i :
		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	į	☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after reasonably tried to do so.	e
		Active duty.	I am currently on active military duty in a military combat zone.	(Active duty.	I am currently on active military duty in a military combat zone.	:

If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 6 of 53

De	btor 1 <u>Cynthia I.</u>	Porter Last Name	Case i	number (if known)	
P	art 6: Answer These Que	stions for Reporting Purposes			
16.	What kind of debts do	16a. Are your debts primarily as "incurred by an individual pi	consumer debts? Cons	sumer debts are d	refined in 11 U.S.C. § 101(8)
	you have?	No. Go to line 16b. Yes. Go to line 17.	,	ny, or neaderiold p	varpose.
		16b. Are your debts primarily money for a business or invest	business debts? Busine	ess debts are deb	ts that you incurred to obtain
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.	The state of the s	ton of the busines	os os investment.
		16c. State the type of debts you ow	e that are not consumer de	ebts or business d	ebts.
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Chapte	er 7. Go to line 18.	TO THE	THE PROPERTY OF THE PROPERTY O
	Do you estimate that after any exempt property is	Yes. I am filing under Chapter 7. administrative expenses an	. Do vou estimate that after	r any exempt prop	erty is excluded and
	excluded and administrative expenses	☐ No			
TTTENTON	are paid that funds will be available for distribution to unsecured creditors?	☐ Yes			
18.	How many creditors do you estimate that you	☑ 1-49 □ 50-99	1 ,000-5,000		25,001-50,000
	owe?	☐ 100-199 ☐ 200-999	5,001-10,000 10,001-25,000		1 50,001-100,000 1 More than 100,000
	How much do you estimate your assets to	2 \$0-\$50,000	\$1,000,001-\$10 million		\$500,000,001-\$1 billion
	be worth?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	lion 🔲	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
n edeleni		\$500,001-\$1 million	\$100,000,001-\$500 m		More than \$50 billion
	How much do you estimate your liabilities	□ \$0-\$50,000 □ \$50,001-\$100,000	\$1,000,001-\$10 million \$10,000,001-\$50 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion
	to be?	\$100,001-\$500,000	\$50,000,001-\$100 mill	lion 🔲	\$10,000,000,001-\$50 billion
Pa	17: Sign Below	⅃ \$500,001-\$1 million	\$100,000,001-\$500 m	illion 🔲	More than \$50 billion
Fo	r you	I have examined this petition, and I correct.	declare under penalty of pe	rjury that the infor	mation provided is true and
		If I have chosen to file under Chapte of title 11, United States Code. I und under Chapter 7.	r 7, I am aware that I may perstand the relief available	proceed, if eligible under each chapt	e, under Chapter 7, 11,12, or 13 ter, and I choose to proceed
		If no attorney represents me and I di this document, I have obtained and r	id not pay or agree to pay s read the notice required by	omeone who is no 11 U.S.C. § 342(I	ot an attorney to help me fill out b).
		I request relief in accordance with the	e chapter of title 11, United	l States Code, spe	ecified in this petition.
		I understand making a false stateme with a bankruptcy case can result in 18 U.S.C. \$\\$ 152, 1341, 1519, and 3	fines up to \$250,000, or im	obtaining money opprisonment for up	or property by fraud in connection to 20 years, or both.
		* Conthia	Toile x		
		Signature of Debtor 1	71-	Signature of Debt	or 2
		Executed on		Executed on	

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 7 of 53

Debtor 1	Cynthia I. First Name Middle Nam	Porter Last Name	Case number (if known)				
or vou i	f you are filing this	The law allows you on a					
oankrupt attorney	cy without an	should understand tha themselves successful	n individual, to represent yourself in bankruptcy court, but you t many people find it extremely difficult to represent ly. Because bankruptcy has long-term financial and legal strongly urged to hire a qualified attorney.				
ın attorn	represented by ey, you do not ile this page.	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.					
		court. Even if you plan to a in your schedules. If you d property or properly claim also deny you a discharge case, such as destroying of cases are randomly audite	erty and debts in the schedules that you are required to file with the ray a particular debt outside of your bankruptcy, you must list that debt of not list a debt, the debt may not be discharged. If you do not list if as exempt, you may not be able to keep the property. The judge can of all your debts if you do something dishonest in your bankruptcy or hiding property, falsifying records, or lying. Individual bankruptcy d to determine if debtors have been accurate, truthful, and complete.				
		If you decide to file without hired an attorney. The cou successful, you must be fa	an attorney, the court expects you to follow the rules as if you had rt will not treat you differently because you are filing for yourself. To be miliar with the United States Bankruptcy Code, the Federal Rules of the local rules of the court in which your case is filed. You must also				
		Are you aware that filing fo consequences?	r bankruptcy is a serious action with long-term financial and legal				
		☐ No ☑ Yes					
		Are you aware that bankru	otcy fraud is a serious crime and that if your bankruptcy forms are out out to be fined or imprisoned?				
		□ No ☑ Yes	od odda se ililed of ililphistred?				
			y someone who is not an attorney to help you fill out your bankruptcy forms?				
		Yes. Name of Person	Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
		have read and understood	ridge that I understand the risks involved in filing without an attorney. I this notice, and I am aware that filing a bankruptcy case without an ose my rights or property if I do not properly handle the case.				
		* Januhia to	rites *				
		Signature of Debtor 1/	Signature of Debtor 2				
		MM/DD//YYY	Y Date MM / DD / YYYY				
		Contact phone	Contact phone				
		Cell phone (219) 231-6	097 Cell phone				
		Email address (4) 1kg	a Poster Luster Email address				

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 8 of 53

Debtor 1	Cynthia	l.	Porte	er	
	First Name		Middle Name	Last Name	
Debtor 2					
(Spouse, if filing)	First Name		Middle Name	Last Name	
United States	Bankruptcy Co	urt for the:	Northern District of I	llinois	
Case number					
	(If known)				

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

я				_			
Ĺ	Ł	П.	紙田織	Summari	ze Y	our /	Assets

1		Your assets Value of wh	T 1
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,600.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,600.00

Part 2: Summarize Your Liabilities

:		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$5,397.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ <u>1,632.00</u>
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$160,642.00
	Your total liabilities	\$167,671.00

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ 1,039.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$ 1,036.00

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 9 of 53

Debtor 1

D€	ebtor 1	Cynthia First Name	I. Middle Name	Porter Last Name		Case number (if known)		
Ð	art 4;	Answer The	se Questio	ns for Administrative and	Canalinating Parameter			
					Statistical Record	S		
0,	_	You have noth		er Chapters 7, 11, or 13? In this part of the form. Check to	his box and submit this	form to the court with your othe	r schedules.	
7.	What k	ind of debt do	you have?	TENDENDEN PRINTE PORTEGORIAL EN DE ELEMENTE UN TRESTE EN PRESIDENT ARABIER MET EN ENTRE DE PERENÇA DE MESEN, ME	A THE TOTAL STATE OF THE PROPERTY OF THE PROPE	at the definition of the entitionistic benefits the entition of the entitle states and entitles the entitle when the entitle states and the entitle entitles when the entitle entitles when the entitles are the entitles and the entitles are the e	t Stade elderet (1998 St. 1982) de hadenis kreptime propriété par Levick (2012) en septembre de sous en 1992 e	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.							
	You this	or debts are no form to the cou	ot primarily co art with your ot	onsumer debts. You have noth her schedules.	ning to report on this pa	rt of the form, Check this box a	nd submit	
8.	From ti	he Statement o	of Your Curre	nt Monthly Income: Copy you B Line 11; OR , Form 122C-1 L	r total current monthly in	ncome from Official		
	7 01111 12	ZZA-T LINE TT,	OK, FUIII 122	6 Line 11, 08 , Form 1220-1 L	Ine 14.		\$98.00	
9.	Copy th	ne following sp	ecial categor	ies of claims from Part 4, line	e 6 of Schedule E/F:		NO 1974 A BANKA KAN KAN KAN KAN KAN KAN KAN KAN KAN	
						Total claim		
	From	Part 4 on Sche	edule E/F, cop	by the following:				
	9a. Don	nestic support o	bligations (Co	py line 6a.)		\$0.00		
	9b. Taxe	es and certain o	other debts you	u owe the government. (Copy li	ine 6b.)	ş 1,632.00		
	9c. Clair	ns for death or	personal injur	y while you were intoxicated. (C	Copy line 6c.)	\$0.00		
	9d. Stud	lent loans. (Cop	y line 6f.)			\$0.00		
	9e. Obliq prior	gations arising of ity claims. (Cop	out of a separa by line 6g.)	ation agreement or divorce that	you did not report as	\$0.00	:	
	9f. Debi	ts to pension or	profit-sharing	plans, and other similar debts.	(Copy line 6h.)	+ \$ 0.00		
tellige as	9g. Tota	ıl. Add lines 9a	through 9f.			s1,632.00		

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 10 of 53

Fill in ti	nis information to identify your case and th	is filing:		
Debtor 1	Cynthia I. Po	rter		
·	First Name Middle Name	Last Name		
Debtor 2 (Spouse, it	filling) First Name Middle Name	Last Name		
United St	tates Bankruptcy Court for the: Northern District o	f Illinois		
Case nur				
Case Rui	mber		Ţ	Check if this is an
Offic	ial Form 106A/B			amended filing
	nedule A/B: Propert	:v		12/15
respons write yo	y where you think it his best. Be as completely be as com	, Land, or Other Real Estate You Own or Ha	le are filing together, bo nis form. On the top of a ve an Interest In	néh ava avuait.
ZŽÍ N	o. Go to Part 2.	est in any residence, building, land, or similar prop	erty?	
L	es. Where is the property?	What is the property? Check all that apply.	egines existence e que se que	
		☐ Single-family home	Do not deduct secured of the amount of any secure	aims or exemptions. Put ed claims on Schedule D:
1,1,	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	
	,	Condominium or cooperative	Current value of the	Current value of the
		☐ Manufactured or mobile home ☐ Land	entire property?	portion you own?
		☐ Investment property	\$	\$
	City State ZIP Code	☐ Timeshare	Describe the nature of	of your ownership
		Other	interest (such as fee the entireties, or a life	simple, tenancy by e estate), if known.
		Who has an interest in the property? Check one.		••
		Debtor 1 only		
	County	Debtor 2 only	☐ Check if this is co	
		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	(see instructions)	mmunity property
		Other information you wish to add about this it	•	
lf vou	own or have more than one, list here:	property identification number:		
,	The state of the s	What is the property? Check all that apply.		
		☐ Single-family home	Do not deduct secured cla the amount of any secured	d claims on Schedule D:
1.2.	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clain	ns Secured by Property.
	,	Condominium or cooperative	Current value of the	
		 ✓ Manufactured or mobile home ✓ Land 	entire property?	portion you own?
		☐ Investment property	\$	\$
	City State ZIP Code	☐ Timeshare	Describe the nature of	f your ownership
	Only State ZIP Code	Other	interest (such as fee s the entireties, or a life	simple, tenancy by e estate), if known.
		Who has an interest in the property? Check one.		
		Debtor 1 only		
	County	Debtor 2 only	П	
		Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is con (see instructions)	mmunity property
		Other information you wish to add about this iter property identification number:	n, such as local	

Entered 07/14/17 10:19:46 Case 17-20986 Doc 1 Filed 07/14/17 Document Page 11 of 53 Cynthia Debtor 1 Porter Case number (if known) First Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Land Investment property City ZIP Code Describe the nature of your ownership State ☐ Timeshare interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: _ 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No ☑ Yes Chrysler Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put 300 the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2005 Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 2.400.00 0.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see

instructions)

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 12 of 53

Cynthia Porter Debtor 1 Case number (if known) Middle Name First Name Who has an interest in the property? Check one. 3,3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☑ No Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? Other information: portion you own? At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 0.00 you have attached for Part 2. Write that number here

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 13 of 53

Debtor 1

Cynthia First Name

Porter

Part 3: Describe Your Personal and Household Items

Do	o you own or have any legal or equitable interest in any of the following items?	portion y	value of the you own?
6.	Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware		
	No sometime to the state of the		
	☑ Yes. Describe Furniture		1,000.00
		\$	1,000.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	2 No		
	Yes. Describe	S	
	THE PROPERTY OF THE PROPERTY O	¥	
	Collectibles of value		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	No No Press Describe	and the same of th	
		\$	
a	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	☑ No		
	Yes. Describe		
		\$	
10, 1	Firearms	112-11-11-11-11-11-11-11-11-11-11-11-11-	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	2 No	tally disease is maliment as accounting	
	Yes. Describe	\$	
	The Land	J	
	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No		
		A response in terms of the second of the sec	000.00
	Yes. Describe Clothes	\$	300.00
		y rennancja i ka meja sa sanaja 3	
2.	Jeweiry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	No variable and the second sec	AND	
	Yes. Describe	\$	
3.1	Non-farm animals	** An Chalde our Antalouse A valeto——	
	Examples: Dogs, cats, birds, horses		
	☑ No		
	Yes. Describe	Note the second second	
	Tes. Describe	\$	
	Any other personal and household items you did not already list, including any health aids you did not list	· · · · · · · · · · · · · · · · · · ·	
	☑ No		
[☐ Yes. Give specific ☐ Yes. Give spec	·	
	information	\$	
5. /	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached		4 000 00
1	for Part 3. Write that number here	→ \$	1,300.00

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main

17.1. Checking account:

18. Bonds, mutual funds, or publicly traded stocks

Document

Page 14 of 53

Debtor 1

16. Cash

17.

Су	nti	nia

Porter

Case number (if known)

	. not Hame	Mindrie Manise	Last Name				
Part 4:	Describe Yo	our Financial A	ssets				
Do you ov	vn or have any	legal or equitab	le interest in any	of the following	,		

Current value of the portion you own?

Do not deduct secured claims or exemptions.

Examples	Money you have in your wallet, in your home,	, in a safe deposit box, and on hand when you t	file your petition	
☑ No □ Yes			Cash:	\$
Deposits o Examples:	Checking, savings, or other financial accounts	s; certificates of deposit; shares in credit unions tiple accounts with the same institution, list eact	s, brokerage houses, n.	
☑ No				
Yes	Ir	nstitution name:		

17.2. Checking account:	\$
17.3. Savings account:	\$
17.4. Savings account:	\$
17.5. Certificates of deposit:	\$
17.6. Other financial account:	\$
17.7. Other financial account:	\$
17.8. Other financial account:	\$
17.9. Other financial account:	 e

Examples: Bond funds, investment accounts with brokerage firms, money market accounts								
No Yes								
		\$						
		\$						
		\$						

an LLC, partnership, ar	nd joint venture	•	
☑ No	Name of entity:	% of ownership:	
Yes. Give specific information about		0%	\$
them		0% %	\$
		0% %	\$

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main

Document Page 15 of 53 Cynthia Debtor 1 Porter Case number (if known)_ First Name Middle Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Z No Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☑ No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: John Hanson 300.00 Prepaid rent; Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ☑ No

☐ Yes	Issuer name and description:	
		\$
	NATION CONTRACTOR CONT	\$
		\$

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 16 of 53

Debtor 1	Cynthia	<u>l, </u>	Porter	Caca number	
	First Name	Middle Name	Last Name	Case number (if known)	
			ere en la companya de la companya d		
24. Interest	s in an educati	on IRA, in a	account in a qualified ABLE proc	ram, or under a qualified state tuition program.	
20 0.3.0	C. §§ 530(b)(1),	529A(b), and	i 529(b)(1).	a quantou state taison program.	
☑ No					
Yes	***************************************	······ Inetiti	ution name and description. Conserve	sh. Gladha a san da ƙ	
		iridati	and description. Separate	ely file the records of any interests.11 U.S.C. § 521(c):
					¢
					Φ
					\$
					\$
5 Truete	navitable er f. 4		- t	_	
exercisa	able for your be	ore interest enefit	in property (other than anything i	listed in line 1), and rights or powers	
☑ No	-				
	Give specific		خوسها مجاهدت محق النبية والأخراج استنبيا الأخياطية والإستان الإستان المتعارف المتعار		wering.
	mation about the	em			_
-					\$
6. Patents.	copyrights fr	ademarks. tr	ade secrets, and other intellectual		·
Example	s: Internet doma	ain names, w	ebsites, proceeds from royalties and	property licensing agreements	
☑ No			, p ===== wew.rejuides und	noonong agreements	
	Give specific	The second secon	-the common surgeous of the first homeomer requires on the section of the section	months proceeding and the second processing the processing and the second processing and the sec	g
	nation about the	em			
		Later Contraction of the Contrac	خدمات الإيمان المعرضة والمستعدم والمستعدم المستعدم المستعدم المستعدم المستعدم والمستعدم والمستعدم والمستعدم المستعدم الم	РЕМІ У МІСУ АКОМИТАТЬ БУДОК, РОДИ МИТИЧУЛЕДИ ЦА ОКОРИ МИНИ МАТИЧУ Б ИДО ДИМОМАТОРИЯ ПАТИТУ МОДЕЛИ В МИТИЦИЯ В ТОТО	\$
7 Licenses	s franchises s	and other go	neral intangibles		V-100
Example	s: Building perm	nta oaner ger its. exclusive	licenses connerative accordation by	oldings, liquor licenses, professional licenses	
₩ No	3 ,	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	mostoco, cooperative association no	numgs, ilquoi ilcerises, professional ficenses	
	Character		التجارية والإستهام ومعصوط الأنواز الإن فيمرا بمراسط معطع لأطارها أم ومي ما ميان في ميان في المرابع و ومعدان لانظ الأراب الإن المناسب أنف المعدود والمناطق المناسب المعدود والمناطق المناسب المعدود والمناطق المناطق ال		
inform	Give specific nation about the	·m			- marketonicon
		Franksianian sa			\$
lonev or ni	roperty owed to				
, J. p.	opolity office to	, , , , , , , , , , , , , , , , , , ,			Current value of the
				: [12] : [12] : [12] : [12] : [12] : [12] : [12] : [12] : [12] : [12] : [12] : [12] : [12] : [12] : [12] :	portion you own? Do not deduct secured
					claims or exemptions.
	nds owed to yo	u			
2 No					
	Give specific info		entropy of the property of the following the section of the sectio	Same National Art and an open common and the School Art of the property of the common and the Co	
á	about them, incl	uding whether	r l	Federal:	<u> </u>
3	you already filed and the tax year	the returns	4	State:	
				Local:	3
				time (Annual and San Annual and Annual and Annual and Annual and Annual and Annual and Annual	
. Family s	upport				
		mp sum alim	ony, spousal support, child support, r	maintenance, divorce settlement, property settlemen	nt
☑ No			• • •		
Yes. (Give specific info	ormation	The second of the first time of a second of the second of	AND TO AND TO CONTROL OF THE AND	
	• • • • • • • • • • • • • • • • • • • •		- Company of the Comp	Alimony:	\$
			Venturality	Maintenance:	\$
			emperate	Support:	\$
			NELACON	Divorce settlement:	
			. I I I I I I I I I I I I I I I I I I I		\$
				Property settlement:	\$
Other am	ounts someon	e owes you			
Examples	Unpaid wages:	, disability ins	surance payments, disability benefits, paid loans you made to someone els	sick pay, vacation pay, workers' compensation,	
☑ No	Journ Security	y ochenis, un	paid loans you made to someone els	e	
	na i i i i i i i i i i i i i i i i i i i	**	and have the definition of the contract of the	The sea form to the second and the s	i
⊶ res. €	Give specific info	ormation	· · · · ·		
			8	3	3

Entered 07/14/17 10:19:46 Case 17-20986 Doc 1 Filed 07/14/17

Page 17 of 53 Document Cynthia Porter Debtor 1 Case number of kno Middle Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Z No ☐ Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. **⊿** No Yes. Give specific Information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Z No Yes. Describe each claim. 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Z No Yes. Describe each claim..... 35. Any financial assets you did not already list Z No Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 300.00 Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned Z No Yes. Describe... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Yes. Describe.

Z No

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 18 of 53

Debtor 1	Cynthia First Name	Middle Name	Porter Last Name	Case number (if known)	
	i not reality	wilde Hattie	Last name		
40. Mac hin	erv. fixtures.	equipment su	pplies you use in business, and	tools of your trade	
₩ No	,,				
	. Describe		= 2.25 (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/2) (1/		**************************************
			er (f. 11/1 h. d. com) an h amacus han yan ay mala (f. Colla h. H. Eller A. V. L. Colla anna v. abarr anna (colla h. L.	NOTE AND ADMINISTRATION OF THE PROPERTY OF THE	\$
				A solution of the solution of	worksome wife
11. Invento	ry				
	. Describe		The second secon		S.
		**************************************	anana mama da ang gingang hitu ging hitu ging kan kan ang mga di hitu ging kan kan da anan da anan da kan kan k Tang kan ang k		The materials
42. Interest	s in partnersh	nips or joint ve	ntures		
☑ No	-	•			
Yes.	Describe	Name of entity	r	% of ownership:	
				,	¢
		MH-Warten			\$ \$
					\$
	11 4				
3. Custom Mo	er lists, mailli	ng lists, or oth	er compilations		
	Do your lists	include perso	nally identifiable information (as	defined in 11 U.S.C. § 101(41A))?	
	☐ No		and the second of the second contract of the		
	Yes. Desc	cribe	(the spiritual and a second and a second and a spiritual spiritual spiritual and a second a second spiritual spirit		- Carlonner
					\$
4. Any bus	iness-related	property you	did not already list	The state of the s	Andrews A.
A No			•		
	Give specific mation	No factors			\$
11101	mauore				\$
		1 3 17 9 11 10 10 10 10 10 10 10 10 10 10 10 10			\$
		M-11		S TO THE STATE OF	
					\$
					\$
					\$
5. Add the	dollar value	of all of your e	ntries from Part 5, including any	entries for pages you have attached	\$ 0.00
tor Part	5. Write that i	number nere		······	
	· · · · · ·				
art 6:	Describe A	nv Farm- and	i Commercial Fishing-Relate	d Property You Own or Have an Interest i	(m
	If you own o	r have an inter	est in farmland, list it in Part 1.	a roporty roa own or mave an interest	•••
_					
	own or have a So to Part 7.	iny legal or eq	uitable interest in any farm- or co	ommercial fishing-related property?	
	Go to line 47.				
					Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
7. Farm an					
	s: Livestock, p	oultry, farm-rai:	ed fish		
No No	¢*	er (dar liikt soon na essenoon aassenoor aan annoon an oon alba oo	aar goon oo aa hooo gor goo o aaraaynoo oo qoo qobayahaa, oo goriyo iya ba baa ka bahaadiibha ah filisana aa aa ka bahaa aa ka aa a		unorg
₩ Yes.	fanny Amerika				ELTERNOONA
	attaria		See District Control of the Section of Control of Contr		\$

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 19 of 53

Debtor 1	Cynthia	<u>l.</u>	Porter		Case number (if known)		
	First Name	Middle Name	Last Name		- I more y		
3. Crops—	either growing	or harvested					
🛭 No	r		والمراوات والمرا				
	Give specific mation				The second secon		
	i.			ustes quant on ref in fell sectors in homeoustes financiphs and till convenient made, for \$1/66/20 wherein for the finites of	eri wiki sawalikan wang mingohi halauran mahama pigipahipa halauran damam mamah sawah sawah sawah makawa makawa	\$	
≀. ⊬arm ian ⊠ No	ia tishing equip			ures, and tools of trade			
Yes.		anne emperatives (1166) e é um hace en a sem espera partir destruir de com	inner nemnems vins, dents of 1905 until teleformers song perg yest and activation is strait over song p	gan kang manga tari Basah ka amaka annag ang artang tah 1200k, an kan annamang ang dag artang kan katalawa annang ang ang artang tah	e international production policy international people of the international people (international people in the international people in the in	~~~	
	de la companya de la	en enne en	nder er genger fræde a 18,000 endersel er er e neueron er skall folklin han enne omgege	ent for Million broad and an annual of Porticion 1990 Million facility of a discontinuous property and the Sillion Facility of American groups and an annual section of the Sillion Facility of American groups and the Sillion Groups and the Sill	Week to the state of the state	\$	
	d fishing supp	lies, chemicals,			The state of the s	nount.	
☑ No	g.vo.v	enember 15 Set Set Set Set Summer, namen y Vycanisty (1985)	Date of the second seco	gark erder trett (1885) varianten kallen erde fra trettigt fra Joseph var enn er en fra 1885 (1885) var til en			
⊶ Yes.							
A 6				none new party model of the control	rely to provide the common control class deprivation on the control or high a light of the control of the contr	\$	
. Any tarn 20 No	n- and commer		ited property you did	-			
	Give specific	t ac hitter I rid neit met Amerikaanssy's te Epismistek' fan Epismistek van de met woork maa	t that it don't fill fill the 'ne interest over the total court and the fill of the fill the fill the court on the interest of the fill th	1984 Madinian in non on nagrino and 15 decisios an Administration and an antique and 20 Security and accommon anguing and 20 Security and			
111011	mation	anne e engles i state, i state e e e en en entre e e e e e e e e e e e e e e e e e e	to 1, of the flat or an annual organization of the contract of the flat of the flat of the flat or an annual organization of the flat of t		Name and was the 1/19 th (19 th 19 t	\$	***************************************
Add the	dollar value of	all of your entr	ies from Part 6, incli	uding any entries for pages	you have attached	s	0.0
IOI FAIL	o. Write that hi	miner here			·····	<u> </u>	
No Yes	Give specific	kara serina ara 110 km² (110 km²) An arawa a arawa 120 (110 km²)	en far	1994 үүлү бүлдүн тамбан таман көп тарууу уударында орган тамуын тамуын талуун бүрүнүү дөгү дөгү көп тамуын тамууу	HAZIMPARA PARAMATAN MATERIAN PARAMATAN PARAMAT	\$	
	Give specific nation				AAA, canson no esta	\$	
	MANAGE AND STREET			man en januarista (januarista januarista jan	OUT AND and a Andrew	\$	
	34.073						
Add the	dollar value of	all of your entri	es from Part 7. Write	that number here	······	\$	0.00
rt 8:	List the Tot	als of Each	Part of this For	m			
Part 1: To	otal real estate,	line 2			-	\$	0.00
	otal vehicles, lii			\$ 0.00			
Part 3: To	otal personal ar	nd household it	ems, line 15	\$ 1,300.00			
Part 4: To	otal financial as	sets, line 36		\$ 300.00			
Part 5: To	otal business-re	elated property,	, line 45	\$0.00			
Part 6: To	otal farm- and fi	ishing-related p	property, line 52	\$0.00			
Part 7: To	otal other prope	erty not listed, l	ine 54	+ \$0.00			
Fotal pers	sonal property.	Add lines 56 thr	rough 61	\$ 1,600.00	Copy personal property total 👈	+ \$	1,600.00
				$\sum_{i=1}^{N} (a_i + a_i) + (a$			
Γotal of a	il property on S	Schedule A/B. A	dd line 55 + line 62			s	1,600.00
	-						

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 20 of 53

Fill in this in	formation to	identify	your case:		
Debtor 1	Cynthia	l.	Po	rter	***************************************
•	First Name	***************************************	Middle Name	Last Name	
Debtor 2					
(Spouse, if filing)	First Name		Middle Name	Łast Name	
United States I	Bankruptcy Coι	art for the: N	lorthern District of	Illinois	
Case number (if known)				and the state of t	

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: **Identify the Property You Claim as Exempt** 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief Automobile **🛭** 💲 2,400.00 735 ILCS 5/12-1001(c) description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B Brief Furniture s 1,000.00 **2**1 \$ 1,000.00 735 ILCS 5/12-1001(b) description: ☐ 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit Brief \$300.00 **☑** \$ 300.00 735 ILCS 5/12-1001(a) description: ☐ 100% of fair market value, up to Line from Schedule A/B: 11 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Νo

Yes

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 21 of 53

Debtor 1

Cynthia	1.	Porter	Comment
First Name	Middle Name	Lasi Name	Case number (if known)

Brief description Schedule A	ion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Security Deposit	\$300.00		735 ILCS 5/12-1001(b)
Line from Schedule A/B:	22		☐ 100% of fair market value, up to any applicable statutory limit	9.99
Brief description:		\$	- • • • • • • • • • • • • • • • • • • •	
Line from Schedule A/B:	M		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	s	To the term of the
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	 \$	
Line from Schedule A/B:	White the Association is a second of the Association is a seco		☐ 100% of fair market value, up to any applicable statutory limit	***************************************
Brief description:		\$	□ \$	
Line from Schedule A/B:	AATONIA.		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	D \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
3rief fescription:	The state of the s	\$	_ \$	
_ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief fescription:		\$	\$	
_ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief fescription:		\$	- s	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief tescription:		\$	\$	
ine from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 22 of 53

Fill in this information to identify your ca				
Debtor 1 Cynthia I. First Name Middle	Porter Name Last Name			
Debtor 2	Last Name			
(Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number			-	
(B KHOWH)				if this is an
			amendo	za ming
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secur	ed by Pron	ortv	40/45
	If two married people are filing together, both are ed			12/15
miornation, il more space is needed, con	V the Additional Page, fill it out, number the entrice	qually responsible to and attach it to this f	r supplying correctorm. On the top of	t any
additional pages, write your name and car	se number (if known).		,	•
1. Do any creditors have claims secured b	by your property?			
No. Check this box and submit this for	m to the court with your other schedules. You have noth	ing else to report on th	is form.	
Yes. Fill in all of the information below.				
Party B. List All Secured Claims				
EALL LIST AN SECURE CIAINS				
2. List all secured claims. If a creditor has n	nore than one secured claim, list the creditor separately	SPORTSONNERS (SPORTSONS)	Column B Value of collateral	Column C Unsecured
As much as possible, list the claims in alph	as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Do not deduct the	that supports this	portion
21	The state of the s		claim	Ifany
Oscar Trejo Creditor's Name	Describe the property that secures the claim:	\$ 5,397.00	\$2,400.00	0.00
515 Segamore	Automobile			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
Lafayette IN 47904	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit			
-	Other (including a right to offset)	_		
Check if this claim relates to a community debt				
Date debt was incurred 07/01/2017	Last 4 digits of account number 1 0 7 6			
2.2	Describe the property that secures the claim:	\$	\$5	0.00
Creditor's Name		and the second		
Number Street	THE CONTRACTOR OF THE CONTRACT	-		
	As of the date you file, the claim is: Check all that apply.	1		
***************************************	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.				
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a	Carer (arounding a right to onset)	•		
community debt Date debt was incurred	Last 4 digits of account number			
	PROCES OF BULLOUIL HUMBUR			

Add the dollar value of your entries in Column A on this page. Write that number here:

5,397.00

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 23 of 53

Ė	II in this in	nformation to i	dentify y	our case;		Cument	r age 2								
-		Cynthia I	20/11/2020/06/2020/2020	Porter											
De	ebtor 1	First Name		Middle Name		Last Name									
	ebtor 2 pouse, if filing)	Sirot blame			**************************************										
	- -			Middle Name		Last Name									
U	nited States i	Bankruptcy Court	for the: N	orthern Distric	ct of Illin	nois									
	ase number known)											<u></u>		if this is an	l
L		manile v.			 			J					amenc	ica ililiy	
		orm 106													
50	chedu	ile E/F:	Cred	litors \	Who	Have I	Unsec	ured Cla	aim	ıs				12/15	
A/B cred nee any	the other : Property ditors with ded, copy additional	Official Form partially secu	xecutory 106A/B) Ired claim leed, fill it your nam	contracts or and on Sche is that are list tout, number e and case n	unexp dule G ted in t r the er umber	,	t could resul ntracts and reditors Who	lt in a claim. A Unexpired Lea Have Claims S	lso list ses (O	t execu fficial I	itory coi Form 10	ntracts 6G). D	on Sch	edule clude any	
1.	331803030	editors have p			· · · · · · · · · · · · · · · · · · ·						·				
	No. Go		nonty un	scured class	na aya	nist your									
	☑ Yes.						***								
· [nonpriority unsecured	amounts. As m claims, fill out t	wnat type luch as po he Contini	of claim it is. I ssible, list the uation Page o	if a claii claims f Part 1	has more than om has both prior in alphabetical . If more than or	ity and nonpr order accordi ne creditor ho	fiority amounts, ng to the credite olds a particular	list that	t claim	here and	show	both pric	ority and	
(ror an exp	lanation of eac	th type of o	claim, see the	instruc	tions for this for	m in the instri	uction booklet.)		877a19uese		11 11 11 14 12 14 14 14 14 14 14 14 14 14 14 14 14 14		TA A A TATA BEDESKRANSKE KAND	150
 -									3	Total	zia imi	Prio: amo		Nonpriority amount	
2.1	Lauder	dale County	Circuit		loc	t 4 digits of acc	armt milmban	3 1 1	Ω ¢	. 16	32 00	¢ 1 6	മമ വവം	0.00	^
	Priority Credi	tor's Name								<u>'</u>	1.12.111	ΨΩ	32.UU 4	·	7
	Number	nstitution Av	/e		. Wh	en was the debt	incurred?	<u>04/28/201</u> 1							
	***				- Ac	of the date you t	file the claim	ie: Chook all that	annl.						
	Meridia	<u>n</u>	MS	39302		Contingent	no, me ciann	is. Office all that	гарріў.						
	City		State	ZIP Code	****	Unfiguidated									
		rred the debt?	Check one.			Disputed									
	Debtor														
		2 only 1 and Debtor 2 o	nlv			e of PRIORITY		claim:							
		one of the debto		her		Domestic support									
		if this claim is				Taxes and certain			ment						
		m subject to of		,		Claims for death of intoxicated	or personal injui	ry while you were							
	No No	043,000 10 01	10011			Other, Specify S	tate Tax Li	ien							
	Yes	PN (et flets Mississi (i scherbe plets plets bester en et en	41547ADIA. 240a baada adamata	Santacine Sinds visnas social servenas i				kordiski na na nakoništa d svoji vrstih a nostapa st obnišiva na zvenim s							
2.2					Las	t 4 digits of acco				ACTA SERVICE ACTA SERVICES	0.00		0.00 \$	0.00) }
	Priority Credit	or's Name				n was the debt			Þ	····		\$	<u> </u>		
	Number	Street				an was the debt	mounto:								
					As	of the date you f	ile, the claim	is: Check all that	apply.						
	***************************************					Contingent									
	City		State	ZIP Code		Unliquidated									
		red the debt? (Check one.			Disputed									
	Debtor				Тур	e of PRIORITY	unsecured o	laim:							
		z only 1 and Debtor 2 or	nlv			Domestic support	obligations								and an and an
		one of the debtor		her		Taxes and certain	other debts you	u owe the govern	ment						And all and
		if this claim is				Claims for death o	r personal injur	y while you were							
	Is the clair	n subject to off				Intoxicated Other. Specify									Contract Management of the Contract
	Yes	to and a street of the contract of the contrac	*****************************	· management and restricted agreement for the state of		and determined the control of the co		enangereentige oo toloolaatelaan oo oonaa		other section and	run arian ar area ar				1

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main

Debtor 1

Cynthia I.

Document

Page 24 of 53

umber (it known)			

Porter Middle Name

Case na

Pæ	List All of Your NONPRIO	RITY Un	secured Claim	s	
3.	Do any creditors have nonpriority un				
	☐ No. You have nothing to report in the Yes				
	nonpriority unsecured claim, list the cre	d claims in ditor separ ditor holds	the alphabetica	al order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do not i, list the other creditors in Part 3.If you have more than three no	s more than one
······································	1				Total claim
<u> </u>	Lauderdale County Justice Nonpriority Creditor's Name	***************************************		Last 4 digits of account number1076	¢ 460.00
	410 Constitution Number Street	 .		When was the debt incurred? 04/05/2012	\$
	Meridian City	MS State	39301 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.			☐ Contingent	
	Debtor 1 only			☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a commu			Student loansObligations arising out of a separation agreement or divorce	
	Is the claim subject to offset? ☑ No ☐ Yes			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Civil Judgement - Check Now	
?	Lauderdale County Justice Nonpriority Creditor's Name	peraphy converse and connect on environment 4 profess	माने में के कारकार पर दारान्य कर देव सामय के किस्सी हैं के किए के किस की कार की किस की किस की किस की किस की की	Last 4 digits of account number When was the debt incurred? $\frac{1}{03/22/2012} \frac{0}{03/22/2012}$	\$309.00
	410 Constitution Number Street Meridian	MS	39301	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one. Debtor 1 only			☐ Unliquidated ☐ Disputed	
	Debtor 2 only			Time of NONDBIODITY	
	 Debtor 1 and Debtor 2 only At least one of the debtors and another 			Type of NONPRIORITY unsecured claim: Student loans	
	Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Judgemet - Money Now 45th	
	☑ No ☐ Yes			Other. Specify Judgemet - Money Now 45th	
	Lauderdale County Justice			Last 4 digits of account number 3 2 1 8	a 350.00
	410 Constitution Number Street			When was the debt incurred? 12/22/2011	V
	Meridian City	MS State	39301 ZIP Code	 As of the date you file, the claim is: Check all that apply. 	
	Who incurred the debt? Check one.	Oldic	Zir Code	☐ Contingent	
	Debtor 1 only			Unliquidated	
	Debtor 2 only			☐ Disputed	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			Student loans	
	Check if this claim is for a commun	ity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset? ✓ No ☐ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Civil Judgement - Cash Depot</u>	

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Page 25 of 53
Case number (d known)

Debtor 1

Cynthia

Porter

Document Last Name

Part 2:

Lauderdale County J	ustice		Last 4 digits of account number 2 1 6 2	
Nonpriority Creditor's Name 410 Constitution	astroe	·····	When was the debt incurred? 10/21/2010	s <u>283.</u>
Number Street				
Meridian	MS	39301	As of the date you file, the claim is: Check all that apply.	
City Who incurred the debt? Ch Debtor 1 only	State eck one.	ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors	and another		☐ Student loans	
Check if this claim is fo			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offse ✓ No ☐ Yes	-		Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Civil Judgement - Quick Cash</u>	
petitini in vinessa kasalapot deli mone zinni siculari manda ci uscondo mana asi manama kasalamba kandida min	constitution and the desired respective and the section and the desired the de	-particus es aculturas por aporta por aporta proprior processos es acustamente concurrente		and the state of t
Advanced Collections Nonpriority Creditor's Name			Last 4 digits of account number 7 7 3 6	s <u>613.(</u>
PO BOX 1630			When was the debt incurred? 07/28/2011	
Number Street	110		As of the date you file, the claim is: Check all that apply.	
Meridian City	MS State	39302 ZIP Code		
·		211 0000	 ☐ Contingent ☐ Unliquidated 	
Who incurred the debt? Che	eck one.		Disputed	
Debtor 1 only				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors a	and another		Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for			Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offse No Yes	t?		Other. Specify Medical - Meridian Med Assoc	
Central Financial Cont		nen millen convenza reputar por un primor por porter ci un no esperimento de californi de reductiva de californi	Last 4 digits of account number 8 7 3 1	\$ <u>550.0</u>
Nonpriority Creditor's Name	,		When was the debt incurred? 05/06/2015	
PO BOX 660873 Number Street			_	
Dallas	TX	75266	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	ck one		☐ Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		•	☐ Student loans	
At least one of the debtors a	nd another		Obligations arising out of a separation agreement or divorce that	
O charlest the state of the state of	a community debt		you did not report as priority claims	
Uneck if this claim is for	a community acce			
Is the claim subject to offset	•		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical - Florida Medical Ctr	

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Cynthia I. Porter Document Page 26 of 53

First Name Middle Name I set Name | Set N

Debtor 1

Part 2:

Ezonklin Call Co			Look A digita of account 1 0 7 6	200.000	
Franklin Coll Svc			Last 4 digits of account number 1 0 7 6	\$_	1,574.(
2978 W. Jackson St			When was the debt incurred? 02/17/2012		
Number Street Tupelo	140	00000	As of the date you file, the claim is: Check all that apply.		
i upelo Sity	MS State	38803 ZIP Code			
Who incurred the debt? Check Debtor 1 only		211 0000	☐ Contingent☐ Unliquidated☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	community debt		you did not report as priority claims		
s the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Metro Ambulance Service		
1 No					
Yes					
	CONTRACTOR OF A SECURITY OF A	constitutes (Medical Arguellogical Education Education (Environment)		and the state of t	*******************
HF Holdings conpriority Creditor's Name	·		Last 4 digits of account number 1 0 7 6	\$	265.
5929 Anno Ave			When was the debt incurred? 11/12/2014		
umber Street		·····	_		
Orlando	FL	32809	As of the date you file, the claim is: Check all that apply.		
ity	State	ZIP Code	Contingent		
Vho incurred the debt? Check of	one.		☐ Unliquidated ☐ Disputed		
I Debtor 1 only			Lisputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a c	ommunity debt		you did not report as priority claims		
the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cashmart Inc		
No			Curer, Specify Cashirmat Cities		
Yes					
and the second	en e	en de la companya de		\$	395.0
Petit Bois Empriority Creditor's Name			Last 4 digits of account number <u>1 2 1 1</u>		
436 Main St			When was the debt incurred? 10/28/2011		
Imber Street	110	20502	As of the date you file, the claim is: Check all that apply.		
Moss Point	MS State	39563 ZiP Code	Contingent		
,	Oldle	2 5000	Unliquidated		
'ho incurred the debt? Check o	ne.		Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and a	another.		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for a c	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
the claim subject to offset?			Other, Specify Returned Check - Check Now		

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main

Debtor 1

Cynthia

Porter

Document

Page 27 of 53
Case number (if known)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Last Name

	age, number the	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total clai
Specialized Mngmnt Sv	c		Last 4 digits of account number 1 0 7 6	s 2,714
1825 24th Ave			When was the debt incurred? 10/01/2013	
Number Street Meridian	MS	39301	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a Is the claim subject to offset? No Yes	State one. another	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Foundation Inc	
Specialized Mngmnt Svo			Last 4 digits of account number 1 0 7 6	\$ 12,265
1825 24th Ave	***************************************	· · · · · · · · · · · · · · · · · · ·	When was the debt incurred? 10/11/2013	
Number Street Meridian	MS	39301	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a disthe claim subject to offset? No Yes	another	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Rush Medical Group	
Specialized Mngmnt Svo			Last 4 digits of account number 4 9 5 6	\$ 105.0
Nonpriority Creditor's Name 1825 24th Ave			When was the debt incurred? 12/10/2013	
Number Street Meridian	MS	39301	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check of Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and a ☐ Check if this claim is for a c Is the claim subject to offset? ☑ No	another	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Rush Neurology, Dr. Ahmad	

Document

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Page 28 of 53

Debtor 1

Cynthia First Name

Porter Middle Name

Case number (if known)

Part 2:

en transitione en propositione de la française de la française de la française de la française de la française Transitione de la française de				Total ci
Trustmark Recovery	Service		Last 4 digits of account number 1 0 7 6	s 5
Nonpriority Creditor's Name 541 Otis Bowen Dr			When was the debt incurred? 10/06/2016	
Number Street Munster	IN	46321	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	ock one		Unliquidated	
Debtor 1 only	ock one.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors a	and another		Obligations arising out of a separation agreement or divorce tha	ŧ
Check if this claim is for	a community debt		you did not report as priority claims	
Is the claim subject to offse	t?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify. NIPSCO	
☑ No			Other: Specify 1411 CCC	
Yes				
TrustMark Bank	and the second	manus securitim (comment framewy for 4000) for feet as 80000.	Last 4 digits of account number 1 0 7 6	s 1,000
Nonpriority Creditor's Name				\$ <u>1100</u> 1
2001 Highway 45 North	<u>th</u>		When was the debt incurred? 07/01/2017	
Meridian	MS	39301	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	ck one		Unliquidated	
Debtor 1 only			Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors a	nd another		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for	a community debt		you did not report as priority claims	
Is the claim subject to offset	?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Banking	
☑ No			Otilei. Specify Darmang	
☐ Yes				
Village of South Hollar			Last 4 digits of account number 1 0 7 6	_{\$} 200
Nonpriority Creditor's Name	-		When was the debt incurred? 07/01/2017	
501 E. 170th St			When was the debt incurred? 07/01/2017	
South Holland	11	60473	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent☐ Unliquidated	
Who incurred the debt? Chec	k one.		Disputed	
✓ Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors as	nd another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for	a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset	?		Other. Specify <u>Tickets</u>	
☑ No				

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Page 29 of 53

Debtor 1

1.

Porter Middle Name

Document

Case number (it known)_

Part 2:

5.7	ter listing any entries on this page, number them beginning		Total claim
	Metro South Hospital Nonpriority Creditor's Name	Last 4 digits of account number 1 0 7 6	\$ 75,000.06
	12935 Gregory St.	When was the debt incurred? 07/01/2017	-
	Number Street Blue Island IL 60406	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	lacksquare Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Medical	
	₩ No		
	Yes		
5.8			and the summer to the summer of the summer o
	St. Catherine Hospital	Last 4 digits of account number 1 0 7 6	\$ <u>13,000.0</u>
	Nonpriority Creditor's Name 4321 Fir Street	When was the debt incurred? $07/01/2017$	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	East Chicago IN 46312 City State ZIP Code	Contingent	
	,	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only		
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims	unit is appropriate
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	***************************************
	Mo	Other. Specify Medical	J. Committee
	Yes		The state of the s
5.9	Administration in the first state assessment and the state of the stat		s 50,000.0
	Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number 1 0 7 6	\$
	901 MacArthur Blvd	When was the debt incurred? $\frac{07/01/2017}{}$	
	Number Street Munster IN 46321	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	and the same of th
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	at Digital Park
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	Eagle Common or
	Is the claim subject to offset?	Other Specify Medical	A CONTRACTOR OF THE PARTY AND A CONT
	☑ No	* * * * * * * * * * * * * * * * * * *	Mayor commercial
	☐ Yes		

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main

Document Page 30 of 53 1. Porter

Debtor 1

First Name

Middle Name

Case number (if known)_

Part 2:

_			4 5 -	
Comcast			Last 4 digits of account number 1 0 7 6	s_1,00
Nonpriority Creditor's Name			When was the debt incurred? 07/01/2017	
PO BOX 3002 Number Street			which was the dept incul ed a	
Southeastern	PA	19398	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check of	ne.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			_	
At least one of the debtors and	another		U Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a c	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify Cable	
₩ No				
Yes				
		enza-construenten embonioni esta esta esta esta esta esta esta esta		militariuminamandicumunique
AT&T			Last 4 digits of account number 1 0 7 6	\$ <u>50</u>
Nonpriority Creditor's Name			When was the debt incurred? 07/01/2017	
PO BOX 5001				
Number Street Carol Stream	IL	60197	As of the date you file, the claim is: Check all that apply.	
City	IL State	ZIP Code		
	Siele	O000	Contingent Unliquidated	
Who incurred the debt? Check o	ne,		Disputed	
Debtor 1 only			— viipatou	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	ammannika daht		you did not report as priority claims	
	zanaunky ueut		Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?			Other. Specify Cable	
☑ No				
Yes	POSSIPPO CONTINUE CO			
			Last 4 digits of account number	\$
Nonpriority Creditor's Name			When was the debt incurred?	
Number Street			 As of the date you file, the claim is: Check all that apply. 	
City	State	ZIP Code	Contingent	
	-		Unliquidated	
Who incurred the debt? Check or	ne.		Disputed	
Debtor 1 only			·	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
			Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?			Other. Specify	
☐ No				

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main

Page 31 of 53

Debtor 1

Cynthia First Name

Middle Name

Porter Last Name

Document

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
 Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	s1,632.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$0.00
	6e.	Total. Add lines 6a through 6d.	6e.	s1,632.00
				Total claim
Total claims	o.			and the second of the second o
Annual Park 1	от.	Student loans	6f.	s 0.00
from Part 2		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	\$ 0.00 \$ 0.00
iom Par 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority	•	
ioni Par 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$ 0.00

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 32 of 53

Fill in this							
Fill in this in	nformation	o identify	your case:				
Debtor	Cynthia First Name	<u>l.</u>	Porter Middle Name			_	
Debtor 2			Middle Name	Last Name			
(Spouse If filing)	First Name		Middle Name	Last Name			
United States	Bankruptcy Co	ourt for the:	Northern Distric	t of Illinois			
Case number (If known)	*						
(ii iolowii)							Check if this is a amended filing
							amended ming
Official F	orm 10	06G					
Schodi	یام ۵۰	Evec	utom C	ontrocto	and Ha		
						nexpired Leases	12/15
1. Do you h No. C Yes. F 2. List sepal example, unexpired Output Description:	ave any exe heck this bo fill in all of th rately each rent, vehick leases.	ecutory con x and file th e information person or e lease, ce	ntracts or uner is form with the on below even i company with ell phone). See	cpired leases? court with your other f the contracts or lead whom you have the	er schedules. Y ases are listed ne contract or this form in the	You have nothing else to report on this on Schedule A/B: Property (Official For lease. Then state what each contrae instruction booklet for more examples.) State what the contract or lease is	form. orm 106A/B). ct or lease is for (for s of executory contracts and
Name	Rosewood	l Dr			 Ара	artment Rental	
Number	Street						
Lansing City	<u></u>	IL.	60438				
Control (Control (Con		Si	tate ZIP Code		Normal National Association (Normal National Association (Normal National Association (Normal National Association (Normal National Nation	and a chang operation is so such some and a change and is some and an analysis of objects of some and an analys	aliterativi sommente anno som samminto ra antidorio, rilações a arrente do aração, comissão do aração, a gas a
2.2	***************************************	****					
Name							
Number	Street		*****				
0.1							
City 2.3		St	ate ZIP Code		olo description de la company de la comp		ti 1847 1974 ki
Name							
ivame							
Number	Street				AND DESCRIPTION OF THE PARTY OF		
0.4							
City	tti etistäi van suuri osaa aja pagagi	St	ate ZIP Code	The Arthur November of the Control o	MATINATPA (LLUN) SEPRENCE TITTES		> CB a 11 a recommenda in 1 a CD Charles por al appropriation or conservation in 1 to 11 a for all
2.4							
Name							•
Number	Street		·····				
City		St	ate ZiP Code			solvering gold of the harmonic page open	
5						 In the control of the c	n oo oo oo ahaa halaa ahaa ahaa ahaa ahaa
Name							
Number	Street						
City		Sta	ate ZIP Code				

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 33 of 53

Fili	in this i	nformation	to identify	your case:		
Deb	itor 1	Cynthia	1.	Porter		
Deb	tor 2	First Name		Middle Name	Last Name	
		J) First Name	***************************************	Middle Name	Last Name	William III
Unit	ed States	Bankruptcy C	ourt for the:	Northern District of	Illinois	
	e number nown)			· · · · · · · · · · · · · · · · · · ·		
L				WHAT I ALWAYS .		Check if this is an amended filing
Off	icial I	Form 10	06H			amail and a second seco
				. Codebto	rs	12/15
and n	umber 1	etner, both a the entries i	re equair n the box	v responsible for s	upplying correct inform	have. Be as complete and accurate as possible. If two married peopl nation. If more space is needed, copy the Additional Page, fill it out, to this page. On the top of any Additional Pages, write your name an
1. E	Do you h	nave any coo	lebtors? (If you are filing a joi	nt case, do not list either s	spouse as a codebtor.)
	Yes					
, 2. V	Vithin th	ne last 8 yea California, Id	rs, have y aho, Louis	ou lived in a comm	nunity property state or i	territory? (Community property states and territories include xas, Washington, and Wisconsin.)
		So to line 3.		, , , , , , , , , , , , , , , , , ,	monoo, r dono raoo, rex	Add, Vyddinigton, and Vylocottom.)
C			use, forme	er spouse, or legal e	quivalent live with you at t	the time?
1	U Y	es. In which	communit	state or territory di	d you live?	. Fill in the name and current address of that person.
1	ï	lome of your poo	una faculta		·	
:		vanie or your spo	use, ionner s	oouse, or legal equivalent		
	ñ	lumber S	treet		***************************************	
	č	City		State	ZIP C	Poda
a le		•	f vour oo		-	
. S	hown ir Schedule Schedule	n line 2 agair e D (Official	1 as a cod Form 106 nedule G 1	lebtor only if that p	erson is a guarantor or Official Form 106E/F), or	codebtor if your spouse is filing with you. List the person r cosigner. Make sure you have listed the creditor on or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt
ξ.				e selle in a like		
3.1						Check all schedules that apply:
	Name					Schedule D, line
!					****	Schedule E/F, line
	Number	Street				Schedule G, line
	City			State	ZIP	Code
3.2						Schedule D, line
	Name				-	Schedule E/F, line
?	Number	Street				☐ Schedule G, line
	City			State	7(P)	Code
3.3	· · · · · · · · · · · · · · · · · · ·		. S. Pharminaen seeses	The second section of the second seco	on the second state of the second	allock is the control of the control
	Name					Schedule D, line
	Number	Chront				Schedule E/F, line
	number	Street				Schedule G, line

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 34 of 53

Fill in this	s information to id	entify your case:			
Debtor 1	Cynthia I.	Porter			
Debtor 2	First Name	Middle Name	Last Name	1	
	ing) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court f	or the: Northern District of Illinoi	s		
Case numb (If known)	er	***	MANUTE CONTRACTOR OF THE PROPERTY OF THE PROPE	Check if	this is:
				🗖 An ar	mended filing
Official !	Form 106l			A sup	oplement showing postpetition chapter 13 ne as of the following date:
				MM /	DD / YYYY
		our Income		****	12/15
if you are s	eparated and you	i. If you are married and not to spouse is not filing with you on the top of any additional p	filing jointly, and you	our spouse is living with	tor 2), both are equally responsible for you, include information about your spouse. ouse. If more space is needed, attach a known). Answer every question.
Fill in your information.	our employment		Debtor 1		Debtor 2 or non-filling spouse
	ave more than one j		(2) 日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日	ennyahatan sara kauman Astrinian dia Astrinian dia Astrinia dia mendangan mendangan kepadahan dia mendangan ber	
	separate page with ion about additiona ers.		☐ Employed ☑ Not employe	ed	Employed Not employed
	part-time, seasonal, ployed work.				
	ion may include stu maker, if it applies.				
		Employer's name			
		Employer's address			
			Number Street		Number Street
			City	State ZIP Code	City State ZIP Code
		How long employed th	ere?		Market and an account plant of grant or mark
Part 2:	Give Details A	bout Monthly Income			:
spouse u	iniess you are sepa	rated.			rite \$0 in the space. Include your non-filing
if you or y below. If	your non-filing spou you need more spa	ise have more than one employ ice, attach a separate sheet to t	er, combine the inforthis form.	rmation for all employers f	or that person on the lines
		·		For Debtor 1	For Debtor 2 or non-filing spouse
2. List mo deduction	nthly gross wages ons). If not paid mo	s, salary, and commissions (b nthly, calculate what the month	pefore all payroll ly wage would be.	2. \$ 0.00	secularinessecurical paragraphic And Child Charles de Child Charles de Child C
3. Estimat	e and list monthly	overtime pay.		3. + \$ 0.00	+ \$
4. Calculat	te gross income. /	Add line 2 + line 3.		4. \$ 0.00	\$

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 35 of 53

Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here..... 0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 0.00 5c. 5d. Required repayments of retirement fund loans 0.00 5d. 5e. Insurance 0.00 5e. 5f. Domestic support obligations 0.00 5f. 0.00 5g. Union dues 5q. 5h. Other deductions. Specify: 0.00 5h. 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a. 8b. Interest and dividends 0.00 8b 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c 8d. Unemployment compensation 8d. 0.00 8e. Social Security 8e. 941.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Foodstamps 98.00 81 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. 1,039.00 Calculate monthly income. Add line 7 + line 9. 1,039.00 0.001,039.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Foodstamps 0.00 11 + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1,039.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

Cynthia

Debtor 1

Porter

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 36 of 53

Fill in this information to identif	y your case:			
Debtor 1 Cynthia I.	Porter Middle Name Last Name	Charl it it	f	
Debtor 2	Middle Name Last Name	Check if this		
(Spouse, if filling) First Name	Middle Name Last Name	An amend	•	tpetition chapter 13
United States Bankruptcy Court for the	: Northern District of Illinois	expenses	as of the followin	tpetition chapter 13 g date:
Case number (if known)	44444	MM / DD /	YYYY	
Official Form 106J	The second secon	PHYPOLINE		
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ossible. If two married people are fil led, attach another sheet to this form	ling together, both are equally res n. On the top of any additional pag	ponsible for supply jes, write your nan	/ing correct ne and case number
Part 1: Describe Your Ho	usehold			
1. Is this a joint case?				
☑ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a	separate household?			
☐ No	,			
☐ Yes. Debtor 2 must fil	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	☑ No	en anterior de la frança esta estrat que estrat frança esta esta frança esta esta esta esta esta esta esta est	Pir yle Northwell (18 de northwell armainn ar had re just episore), y e northwell ar ann an de armainn y e	there for an experience design of A therefore the second property is the first of the second property and a series
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.		- 1190min		No No
Harries,				
		*****	····	☐ No ☐ Yes
				□ No
			************	☐ Yes
				□ No
				☐ Yes
		AND THE RESIDENCE OF THE PERSON OF THE PERSO		□ No □ Yes
3. Do your expenses include expenses of people other than	☑ No			— 168
yourself and your dependents?	Yes	e binadik rekeprometri verk kondebilaktet list berarra ek roront birk list erirone de metekbirk		
Cart 2: Estimate Your Ongoi	ng Monthly Expenses			777711274
	bankruptcy filing date unless you a	re using this form as a sunnlemen	t in a Chanter 13 c	asa ta rapart
expenses as of a date after the ban applicable date.	kruptcy is filed. If this is a suppleme	ental <i>Schedule J</i> , check the box at	the top of the form	ase to report and fill in the
	-cash government assistance if you			tion of
	it on Schedule I: Your Income (Office	•	Your exper	1505
 The rental or home ownership e any rent for the ground or lot. 	xpenses for your residence. Include		4. \$	226.00
If not included in line 4:				0.00
4a. Real estate taxes		•	4a. \$	0.00
4b. Property, homeowner's, or re		•	4b. \$	0.00
4c. Home maintenance, repair, a		•	4c. \$	0.00
 4d. Homeowner's association or 	condominium dues	4	4d. \$	0.00

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 37 of 53

Debtor 1 Cynthia I. Porter
First Name Middle Name Last Name

Case number (# known)

			Your ex	«penses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	150.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	250.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	40.00
10.	Personal care products and services	10.	\$	20.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.		_	
	Do not include car payments.	12.	\$	45.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	225.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
4.0		mu.	·	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 108I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incomp	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 38 of 53

Debtor	Cynthia I. Porter First Name Middle Name Last Name Case n	sumber (if known)	***************************************	
21. Ot	ner. Specify:	21.	+\$	0.00
22. Ca	culate your monthly expenses.	denovamental (deministrative vitra attribuits de existence de de difference a veloculos a vitra de la difference a veloculos a vitr	h denna 166 ta airthead Arfolio de Caran, acus cost a despetito performitare a la a delection
22	. Add lines 4 through 21.	22a.	\$	1,036.00
221	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
220	. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	1,036.00
23. Cal o	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,039.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,036.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	3.00
Fore	ou expect an increase or decrease in your expenses within the year after you file this f example, do you expect to finish paying for your car loan within the year or do you expect you gage payment to increase or decrease because of a modification to the terms of your mortga	ır		
2 1 N		90.		
☐ Y	es. Explain here:	18 P. C. Charles and Annies School States of Community Services.	Siderida Nadarra um remara e especiale de que appura	en en er et nemmet 1957 en, tre formet en er en et en en et formet de formet et e
	CONTROL OF THE STATE OF THE STA			

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 39 of 53

	iormation t	o identif	y your case:				
ebtor 1	Cynthia First Name	I.	Porter				
ebtor 2			Middle Name	Last Name			
ouse, if filing)			Middle Name	Last Name			
		ourt for the	: Northern District of	Illinois			
e number nown)				**************************************			
		*****				☐ Check if the	
						amended	filing
official	l Form	106D	ec				
ecl:	aratio	on A	bout an	Individual	Debtor's Schedu	uloc	
		177711111111111111111111111111111111111				1169	12/1
two marr	ied people	are filing	together, both are	equally responsible for	supplying correct information.		
u must f	file this form	n whenev	ver vou file hankrun	tov schedules or among	led schedules. Making a false statem		
taining r	noney or pr	operty h	v fraud in connection	n with a hankruntou ca	se can result in fines up to \$250,000,		VI
are or h	oth 1811S	C 88 484	2, 1341, 1519, and 3	era	se can result in fines up to \$250,000,	or imprisonment for up to	20
a15, 01 D	Util. 10 U.S.	C. 99 15	2, 1341, 1519, and 3:	5/1.			
	Sign Beld	ow.					
	Sign Belo	ow .					
	Sign Belo	ow .					
Did you			/ someone who is N	OT an attorney to help	VOLI fill out hankrunter forme?		· · · · · · · · · · · · · · · · · · ·
			/ someone who is N	OT an attorney to help	you fill out bankruptcy forms?		
☑ No	pay or agre	ee to pay					<u> </u>
☑ No	pay or agre	ee to pay		OT an attorney to help		Notice, Declaration, and	
☑ No	pay or agre	ee to pay				Notice, Declaration, and	· · · · ·
☑ No	pay or agre	ee to pay			Attach Bankruptcy Petition Preparer's I	Notice, Declaration, and	
☑ No	pay or agre	ee to pay			Attach Bankruptcy Petition Preparer's I	Notice, Declaration, and	•
☑ No	pay or agre	ee to pay			Attach Bankruptcy Petition Preparer's I	Notice, Declaration, and	
☑ No	pay or agre	ee to pay			Attach Bankruptcy Petition Preparer's I	Notice, Declaration, and	
☑ No □ Yes.	n pay or agree. Name of pe	ee to pay erson			Attach Bankruptcy Petition Preparer's I Signature (Official Form 119).		• • • • • • • • • • • • • • • • • • • •
☑ No Yes.	n pay or agree. Name of pe	ee to pay	declare that I have re		Attach Bankruptcy Petition Preparer's I		
☑ No Yes.	n pay or agree. Name of pe	ee to pay	declare that I have re		Attach Bankruptcy Petition Preparer's I Signature (Official Form 119).		
☑ No Yes.	n pay or agree. Name of perpendity of perpendity of perpendity of perpendity are true as	ee to pay	declare that I have rect.		Attach Bankruptcy Petition Preparer's I Signature (Official Form 119).		
☑ No Yes.	n pay or agree. Name of perpendity of perpendity of perpendity of perpendity are true as	ee to pay erson erjury, I c nd corre	declare that I have rect.		Attach Bankruptcy Petition Preparer's I Signature (Official Form 119).		
☑ No ☐ Yes.	n pay or agree. Name of perpendity of perpendity of perpendity of perpendity are true as	ee to pay erson erjury, I c nd corre	declare that I have rect.	ead the summary and so	Attach Bankruptcy Petition Preparer's I Signature (Official Form 119).		
☑ No ☐ Yes. Under p that the	n pay or agree. Name of perpendicular o	ee to pay erson erjury, I c nd corre	declare that I have rect.	ead the summary and so	Attach Bankruptcy Petition Preparer's (Signature (Official Form 119). chedules filed with this declaration a		
☑ No ☐ Yes. Under p that the	n pay or agree. Name of perpendity of perpendity of perpendity of perpendity are true as	ee to pay erson erjury, I c nd corre	declare that I have rect.	ead the summary and so	Attach Bankruptcy Petition Preparer's (Signature (Official Form 119). chedules filed with this declaration a		
No Yes.	n pay or agree. Name of perpendicular o	ee to pay erson erjury, I c nd corre	declare that I have rect.	ead the summary and so	Attach Bankruptcy Petition Preparer's (Signature (Official Form 119). chedules filed with this declaration a		
☑ No Yes.	n pay or agree. Name of perpendicular o	ee to pay erson erjury, I c nd corre	declare that I have rect.	ead the summary and so	Attach Bankruptcy Petition Preparer's I Signature (Official Form 119). chedules filed with this declaration a		

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 40 of 53

Debtor 1 Cynthia I. Porter First Name Middle Name			
First Name	- Anna Carlotte Control of the Contr		
Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of	of Illinois		
Case number (If known)			Double to
			Check if this is an amended filing
Official Form 107			
Statement of Financial Affai	irs for Indi	viduals Filing for Bankrupto	> V 04/16
Be as complete and accurate as possible. If two mai information. If more space is needed, attach a sepa- number (if known). Answer every question.	rried people are fili rate sheet to this fo	ng together, both are equally responsible for supp orm. On the top of any additional pages, write your	helman a a 4
Part 1: Give Details About Your Marital St	atus and Where `	You Lived Before	
1. What is your current marital status?			
Married			
☑ Not married			
2. During the last 3 years, have you lived anywhere			
No	otner than where	you live now?	
Yes. List all of the places you lived in the last 3	years. Do not includ	de where you live now.	
Debtor 1:	Dates Debtor 1		Detec Dubton 0
	lived there		
			Dates Debtor 2 lived there
		☐ Same as Debtor 1	lived there
3578 Block Ave	Esom	☐ Same as Debtor 1	
Number Street	From	Same as Debtor 1 Number Street	lived there Same as Debtor 1 From
	From		lived there Same as Debtor 1
Apt. 106 East Chicago IN 46312			lived there Same as Debtor 1 From
Number Street Apt. 106			lived there Same as Debtor 1 From
Apt. 106 East Chicago IN 46312		Number Street	Same as Debtor 1 From To
Apt. 106 East Chicago IN 46312	To	Number Street City State ZIP Code	Same as Debtor 1 From To Same as Debtor 1
Apt. 106 East Chicago IN 46312	To	Number Street City State ZIP Code	Same as Debtor 1 From To Same as Debtor 1 From
Apt. 106 East Chicago IN 46312 City State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1	Same as Debtor 1 From To Same as Debtor 1
Apt. 106 East Chicago IN 46312 City State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1	Same as Debtor 1 From To Same as Debtor 1 From
Apt. 106 East Chicago IN 46312 City State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1	Same as Debtor 1 From To Same as Debtor 1 From
Number Street Apt. 106 East Chicago IN 46312 City State ZIP Code Number Street City State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor 1 From To Same as Debtor 1 From To To
Number Street Apt. 106 East Chicago IN 46312 City State ZIP Code Number Street City State ZIP Code 3. Within the last 8 years, did you ever live with a s states and territories include Arizona, California, Ida	To	Number Street City State ZIP Code Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor 1 From To Same as Debtor 1 From To
Number Street Apt. 106 East Chicago IN 46312 City State ZIP Code Number Street City State ZIP Code	To From To pouse or legal equento, Louisiana, Neva	Number Street City State ZIP Code Number Street City State ZIP Code City State ZIP Code	Same as Debtor 1 From To Same as Debtor 1 From To

Explain the Sources of Your Income

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 41 of 53

or 1 Cynthia I. Porter First Name Middle Name Last	Name	Case nu	umber (if known)	
Did you have any income from employmer Fill in the total amount of income you received If you are filing a joint case and you have inco	d from all jobs and all bus	inesses, including part-ti	ime activities	ndar years?
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
,	Operating a business		Operating a business	
For last calendar year:	Wages, commissions, bonuses, tips	t.	Wages, commissions,	
(January 1 to December 31, 2016 YYYY	Operating a business	4	bonuses, tips Operating a business	\$
Parkla address to the control of the	Wages, commissions,		☐ Wages, commissions,	
For the calendar year before that:			bonuses, tips	_
(January 1 to December 31, 2015 YYYY id you receive any other income during the clude income regardless of whether that income memployment, and other public benefit payment ambling and lottery winnings. If you are filing	ome is taxable. Examples ents; pensions; rental inc a joint case and you hav	of other income are alim ome; interest; dividends; e income that you receive	Operating a business nony; child support; Social S money collected from lawsued together, list it only once	its royalties and
(January 1 to December 31, 2015 YYYY Did you receive any other income during the include income regardless of whether that income memployment, and other public benefit payment ambling and lottery winnings. If you are filing	Operating a business is year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav	of other income are alim ome; interest; dividends; e income that you receive	Operating a business nony; child support; Social S money collected from lawsued together, list it only once	its royalties and
(January 1 to December 31, 2015 YYYY Did you receive any other income during the include income regardless of whether that income memployment, and other public benefit payment ambling and lottery winnings. If you are filing list each source and the gross income from each source and the gross income from each source and the gross income from each source.	Operating a business is year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav	of other income are alim ome; interest; dividends; e income that you receive	Operating a business nony; child support; Social S money collected from lawsued together, list it only once	its rovalties and
(January 1 to December 31, 2015 YYYY rid you receive any other income during the include income regardless of whether that income memployment, and other public benefit payment ambling and lottery winnings. If you are filing list each source and the gross income from each 100 No	Operating a business is year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav ach source separately. D	of other income are alim ome; interest; dividends; e income that you receive	Operating a business nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	its royalties and
id you receive any other income during the include income regardless of whether that income memployment, and other public benefit payment ambling and lottery winnings. If you are filing list each source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the gross	Operating a business is year or the two previous taxable. Examples ents; pensions; rental inc a joint case and you have ach source separately. Debtor 1. Sources of income Describe below.	of other income are alimome; interest; dividends; e income that you receive to not include income that Gross income from each source (before deductions and	Operating a business mony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions)
(January 1 to December 31, 2015 YYYY id you receive any other income during the clude income regardless of whether that income memployment, and other public benefit paymenthing and lottery winnings. If you are filing at each source and the gross income from each to the source and the gross income from each the gross income from	Operating a business is year or the two previous test taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	of other income are alimome; interest; dividends; e income that you receive to not include income that Gross income from each source (before deductions and exclusions)	Operating a business nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below	Gross income from each source (before deductions and exclusions)
(January 1 to December 31, 2015 YYYY id you receive any other income during the clude income regardless of whether that income memployment, and other public benefit paymenthing and lottery winnings. If you are filing st each source and the gross income from each yes. Fill in the details.	Operating a business is year or the two previous test taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	of other income are alimome; interest; dividends; e income that you receive to not include income that Gross income from each source (before deductions and exclusions)	Operating a business nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below	Gross income from each source (before deductions)
id you receive any other income during the clude income regardless of whether that income memployment, and other public benefit paymenthing and lottery winnings. If you are filing st each source and the gross income from each yes. Fill in the details.	Operating a business is year or the two previous test taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$ 6,587.00	Operating a business nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below	Gross income from each source (before deductions and exclusions)
(January 1 to December 31, 2015 YYYY Indid you receive any other income during the include income regardless of whether that income memployment, and other public benefit payment ambling and lottery winnings. If you are filing list each source and the gross income from each of the income from each of the income from each of the income from the income from the income from the income from each of the income from the income from the income from each of the income from the income from the income from each of the income from the inco	Operating a business is year or the two previous test taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions) \$ 6,587.00 \$ 5.587.00	Operating a business nony; child support; Social S money collected from lawsued together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
id you receive any other income during the include income regardless of whether that income memployment, and other public benefit payment ambling and lottery winnings. If you are filing st each source and the gross income from each of the source and the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016)	Operating a business is year or the two previous test taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions) \$ 6,587.00 \$ 5.587.00	Operating a business nony; child support; Social S money collected from lawsu ed together, list it only once it you listed in line 4. Debtor 2 Sources of income Describe below	Gross income from each source (before deductions and exclusions)
(January 1 to December 31, 2015 YYYY Indid you receive any other income during the include income regardless of whether that income memployment, and other public benefit payme ambling and lottery winnings. If you are filing list each source and the gross income from each of the income from each of the income income income from each of the income income from each of the income income from each of the income income income from each of the income income from each of the income income income income income income each of the income inc	Operating a business one is taxable. Examples ents; pensions; rental inc a joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	of other income are alimone; interest; dividends; e income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$ 6,587.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Operating a business nony; child support; Social S money collected from lawsued together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions) \$
Old you receive any other income during the include income regardless of whether that income ambling and lottery winnings. If you are filing list each source and the gross income from each of the in	Operating a business one is taxable. Examples ents; pensions; rental inc a joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions) \$ 6,587.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Operating a business nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions) \$

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 42 of 53

	Cynthia First Name	Middle Name	Porter			Case number (f known)	
	1 11 31 14213/6	Madde Manie	Las	st Name				
Part 3:	List Certai	n Paymer	its You M	ade Before You	Filed for Bankr	uptcy		
6. Are eit	ther Debtor 1's	s or Debtor	2's debts ;	primarily consume	r debts?			
☐ No	. Neither Deb	otor 1 nor D an individua	ebtor 2 has	s primarily consum for a personal, famil	n er debts. Consum y, or household pu	ner debts are define	ed in 11 U.S.C. § 101(8) as
				for bankruptcy, did			or more?	
	No. Go t	o line 7.						
	tota	ii amount yo	ou paid that	whom you paid a to creditor. Do not incl	ude payments for	domestic support of	nligations such as	
	Chii	a support ar	nd alimony.	Also, do not include and every 3 years a	e payments to an a	ittorney for this bank	kruptcy case.	
⊠ Yes						med on or after the	date of adjustment.	
TALL Yes				primarily consum			_	
			o you med	for bankruptcy, did y	you pay any crediti	or a total of \$600 or	more?	
	☑ No. Go to							
	cred	iitor. Do not	i include pay	whom you paid a to yments for domestic de payments to an a	support obligation	ns, such as child sui	unt you paid that oport and	
				4.5	and the second	No training as a subsequence as a	er er stagen til er stagen v	At the second
				Dates payme		unt paid Amo	ount you still owe	Was this payment for
	Creditor's	Name		***************************************	\$	<u> </u>		☐ Mortgage
								☐ Car
	Number	Street						Credit card
	124144444							Loan repayment
								Suppliers or vendors
	City		State	ZIP Code				Other
						italiantita en esta fondia en la composició	de transcribentation and experience	
	Creditor's	Name			\$	\$		☐ Mortgage
								Car
	Number	Street			And the same of th			Credit card
		···	WW					Loan repayment
								Suppliers or vendors
	City	S	State	ZIP Code				Other
	e n e a						*** ***********************************	
	Creditor's I	Name			<u> </u>	\$	***************************************	☐ Mortgage
								☐ Car
	Number	Street						Credit card
								Loan repayment
	****	7-0-11-11-11-1						☐ Suppliers or vendors
								☐ Other

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 43 of 53

tor 1	Cynthia	1.	Porter			Case number (if known)
	First Name	Middle Name	Last Name		_	, and the second	· · · · · · · · · · · · · · · · · · ·
corpo agent such	ers include you trations of whic i, including one as child suppor	r relatives; a h you are an for a busine t and alimor	ny general partners; officer, director, penss you operate as a ly.	relatives of any son in control, o	general partners; p or owner of 20% or i	partnerships of whice more of their voting	who was an insider? th you are a general partner; securities; and any managing or domestic support obligations,
☐ Ye	es. List all payr	nents to an i	nsider.	Dates of	Total amount	Amount you still	Reason for this payment
				payment	paid	owe	Total on the payment
Ī	nsider's Name		A Additional Control of the Control		\$	\$	
ñ	Number Street						
- 7	Dity		State ZIP Code				
			Sidle ZiP Code				
le	nsider's Name				\$	\$	
N	Number Street			- WAA			
•			47+110-4	-			
ō	City		State ZIP Code	•			
an ins Include	e payments on	debts guara	or bankruptcy, did y nteed or cosigned by nefited an insider.		Total amount	, garan i Marini Indonesia da ka	n account of a debt that benefited Reason for this payment
				•	¢	Pitcheline	Include creditor's name
in	nsider's Name				Ψ	Ψ	
N	umber Street			444.		Acceditation property in a second sec	
	770710000000000000000000000000000000000	***************************************				чения ченене объедене	
Ci			State ZIP Code			recommendate for	
Īn	sider's Name	API-Markette			\$	\$	
N	umber Street			*************************************		and the same of th	
_						V Talanti A Cumino do Constitución de Constitu	
Ċi	iv	······	State ZIP Code				

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 44 of 53

btor 1	Cynthia First Name	Middle Name	Porter Last Nan	Case number (# known)	
			200(1)(1)	•	
ırt 4:	Identify L	egal Actio	ns, Reposse:	ssions, and Foreclosures	
Withi	n 1 year befoi	e you filed	for bankruptcy	. Were you a party in any lawsuit court action, or administrative proceeds	na?
LIST A	Il such matters ontract dispute	, including p	ersonal injury c	ases, small claims actions, divorces, collection suits, paternity actions, support	or custody modification
M No					
	o es. Fill in the d	etails.			
			!	Nature of the case Court or agency	
			5 e 5 s	and the second s	Status of the case
C	Case title			Court Name	- Pending
_					On appeal
			The Constitution of	Number Street	Concluded
С	Case number _				
				City State ZIP Code	
c	Case title		7		D
•	Ase due		The state of the s	Court Name	Pending On appeal
	·····	· · · · · · · · · · · · · · · · · · ·		Number Street	Concluded
С	ase number				_ 00110,0000
				City State ZIP Code	
	s. Fill in the inf			Describe the property Date	Value of the property
	Creditor's Nam	e			\$
	Number Stre	et		Explain what happened	
				Property was repossessed.	
				Property was foreclosed. Property was garnished	
	City		State ZIP Code	Property was garnished. Property was attached, seized, or levied.	
	14524 (1414) (11 41 hallon sessen 4424)	19. TO LETTE TO SELECT THE THE SERVENCE OF THE	er o richte och de till de en	Describe the property Date	Aleba af th
				AND THE PROPERTY OF THE PROPER	Value of the property
				ACALANA ANA	\$
	Creditor's Name	3			**************************************
	Number Stree				
	Number Street	ei		Explain what happened	
				Property was repossessed.	
				Property was foreclosed.	
	City		State ZIP Code	Property was garnished.	
				Property was attached, seized, or levied.	

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 45 of 53

No Yes. Fill in the details. Describe the action the creditor took Creditor's Name Number Street Last 4 digits of account number: XXXX— hin 1 year before you filed for bankruptcy, was any of your property in the possession of an ditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions nin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more the No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Person to Whom You Gave the Gift Number Street Describe the gifts Describe the gifts Describe the gifts Describe the gifts		***************************************
Yes. Fill in the details. Describe the action the creditor took Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX—		
No Yes. Fill in the details. Describe the action the creditor took Creditor's Name Number Street Last 4 digits of account number: XXXX— thin 1 year before you filed for bankruptcy, was any of your property in the possession of an ditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions hin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more the No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you		
Yes. Fill in the details. Describe the action the creditor took Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX—	stitution, set off an	y amounts from you
Person to Whom You Gave the Gift Number Street Describe the action the creditor took Creditor's Name Last 4 digits of account number: XXXX— Last 4 digits of account number: XXXX— Last 4 digits of account number: XXXX— hin 1 year before you filed for bankruptcy, was any of your property in the possession of an didrors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Describe the gifts Person's relationship to you Describe the gifts Describe the gifts		
Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX— hin 1 year before you filed for bankruptcy, was any of your property in the possession of an ditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions hin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more the No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Describe the gifts Describe the gifts		
Describe the action the creditor took Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX—		
City State ZIPCode Last 4 digits of account number: XXXX— thin 1 year before you filed for bankruptcy, was any of your property in the possession of an ditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions hin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Person to Whom You Gave the Gift Number Street City State ZIPCode Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Describe the gifts	Date action	Amount
City State ZIP Code Last 4 digits of account number: XXXX—	was taken	St. Martine
City State ZIP Code Last 4 digits of account number: XXXX—		
City State ZIP Code Last 4 digits of account number: XXXX—	***	\$
hin 1 year before you filed for bankruptcy, was any of your property in the possession of an ditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions nin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more the No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Describe the gifts Person to Whom You Gave the Gift Describe the gifts Describe the gifts Describe the gifts Describe the gifts		
hin 1 year before you filed for bankruptcy, was any of your property in the possession of an ditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions nin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more the No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Describe the gifts Person to Whom You Gave the Gift Describe the gifts Describe the gifts Describe the gifts Describe the gifts	To a large design of the l	
hin 1 year before you filed for bankruptcy, was any of your property in the possession of an ditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions nin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more the No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Person to Whom You Gave the Gift Number Street Describe the gifts Describe the gifts Describe the gifts Describe the gifts	***************************************	
No Yes List Certain Gifts and Contributions No No No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Person to Whom You Gave the Gift Number Street Dity State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Describe the gifts Describe the gifts	***************************************	
No Yes List Certain Gifts and Contributions hin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more to No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Describe the gifts		
No Yes List Certain Gifts and Contributions hin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more to No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Describe the gifts	assignee for the be	nefit of
List Certain Gifts and Contributions hin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more to No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Describe the gifts		
List Certain Gifts and Contributions hin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more the No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts		
nin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more to No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Describe the gifts Person's relationship to you Describe the gifts Describe the gifts		
nin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more to No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Describe the gifts Person's relationship to you Describe the gifts Describe the gifts		
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Describe the gifts		
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Describe the gifts		
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Describe the gifts	han \$600 per persor	17
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Describe the gifts	tooo por poroor	
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts		
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person Describe the gifts		
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person Describe the gifts		18 B. 18
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500 Describe the gifts Describe the gifts	Dates you gave the gifts	ve Value
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500 Describe the gifts Describe the gifts		
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts	produced by the second by the	
Person's relationship to you Sifts with a total value of more than \$600 Describe the gifts Der person		\$
Person's relationship to you Sifts with a total value of more than \$600 Describe the gifts Der person		•
Person's relationship to you Sifts with a total value of more than \$600 Describe the gifts Der person		\$
Person's relationship to you Sifts with a total value of more than \$600 Describe the gifts Der person		
Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Describe the gifts		
Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Describe the gifts	and the second s	
Gifts with a total value of more than \$600 Describe the gifts per person	Market Late 14	
per person the first that the state of the s		
Der person The American Control of the Control of t		
	Dates you gave	e Value
Person to Whom You Gave the Gift	the gifts	. •
Person to Whom You Gave the Gift	and the same of th	•
		\$
***************************************		\$
lumber Street	1	
4	1 600	
Sity State ZIP Code		
Person's relationship to you		

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 46 of 53

tor 1	Cynthia First Name	I. F	orter	Name Case number (# known)	
		Wasie Halle	Last	Naire	
With	nin 2 vears befo	ore vou filed fo	r hankrun	try did you give any gifte as containst	
ZÍ i	Nio	, o y o a mou i	, banki up	tcy, did you give any gifts or contributions with a total value of mo	re than \$600 to any charity?
	No Yes. Fill in the de	otails for anab	~!6	ether at a	
_	res. i iii iii tile di	etalis for each	girt or conti	ROUTION.	
	Gifts or contributhat total more ti	itions to charitie	: 5	Describe what you contributed Date y	ou Value
	chat total more ti	nan \$600		North Andrew Contri	
7	Charity's Name	····		A Angelon	\$
	,				
-		~~····			\$
				Per dana de	
ĩ	lumber Street			erenza popo	
			1	is according to	
<u>-</u>	ity State	ZIP Code	Marine Commission		
Ŭ	oldie.	ZIF Code	:	Some with the first the second section of the source of the second section of the section of the second section of the sectio	
	1:-40-4				
6:	List Certa	in Losses			
1	Describe the prop how the loss occ	perty you lost ai urred	ıd	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	your Value of property
				claims on line 33 of Schedule A/B: Property.	
1			40		\$
***************************************			***************************************		Ψ
		THE THE PERSON OF THE PERSON O	at of the symbological property of the symbol specific of the symbol	- Angeles in a Charle (1947) and the control of the	
7:	List Certair	n Payments	or Transf	ers	the state of the second of the
ithi	n 1 vear before	you filed for l	ankrunta		
uc	onsuited about	t seeking bani	kruptcy or	, did you or anyone else acting on your behalf pay or transfer any preparing a bankruptcy petition?	
duc	le any attorneys,	, bankruptcy pe	etition prep	arers, or credit counseling agencies for services required in your bankri	uptcy.
N					
Ye	es. Fill in the det	ails.			
				Description and value of any property transferred Date pa	
=		·		transfer	
۲	erson Who Was Paid	d		made	National transfer of
ĩ	lumber Street	***************************************			
					<u> </u>
	· · · · · · · · · · · · · · · · · · ·				•
_					<u> </u>
ō	ity	State ZIF	Code		
_					
Ē	mail or website addre	388	-		
p	erson Who Made the	Payment, if Not Yo	u		
	ATTACAMENT AND)		

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 47 of 53

	Cynthia I. First Name Mid	Porter		Cas	e number (if known)		
	i ner izatite Wid	Idle Name [st Name		· , <u>-</u>		
000×41	ક રાત્રાના કર્યા કરા કરા કર્યા કર્યા કર્યા કર્યા કર્યા કર્યા કરા કર્યા કરા કરા કર્યા કર્યા કર્યા કર્યા કરા કરા કરા કર્યા કરા કરા કર્યા કરા કર્યા કરા કરા કરા કર્યા કરા કરા કરા કરા કરા કરા કરા કરા કરા કર	Ned horses and an electrical physical physical policy more as also are gr	Description and value o	f any property transfer	Ted	Date payment or transfer was made	Amount of payment
ĩ	Person Who Was Paid		-			The second secon	
ī	Number Street	M	•				\$
-		***************************************	nd-			Transfer of the Control of the Contr	\$
ō	City	State ZIP Code	•			The American Control of the Control	
Ē	Email or website address	<u></u>	was			An and an analysis of the state	
F	Person Who Made the Pay	ment, if Not You	7-J-5, 1994.		:		
2 No	ot include any payme o es. Fill in the details.		ou listed on line 16.				
			Description and value of	any property transferr	ed	transfer was	Amount of payr
Ē	Person Who Was Paid				The state of the s	made	
ĭ	Number Street		to the state of th		Mehr und en er en		\$
;	City	State ZIP Code			TO A MARKET PARTY AND A PARTY.		\$
ranst	ferred in the ordina le both outright trans	ary course of you sters and transfers	ptcy, did you sell, trade, on business or financial affat made as security (such as the already listed on this stated on this stated on the st	airs? the granting of a secu			
o noi	it include gifts and tra	ansiers that you is			ribe any property c		Date transfe
o noi No Ye	ot include gifts and trace.		* /\(\lambda	property Desci		or payments received	
o noi No Ye	of include gifts and traces. Fill in the details. First who Received Trans		Description and value of	property Desci	ribe any property o	or payments received	
onoi Nc Nc Pe	ot include gifts and trace.		Description and value of	property Desci	ribe any property o	or payments received	
O NO No Ye	of include gifts and traces. Ses. Fill in the details. Person Who Received Translumber Street		Description and value of	property Desci	ribe any property o	or payments received	
No No No	of include gifts and traces. Ses. Fill in the details. Person Who Received Translumber Street	isfer State ZIP Code	Description and value of	property Description of del	ribe any property o	or payments reçeived ige	
No N	of include gifts and traces. S. Fill in the details. Person Who Received Translumber Street Street	state ZIP Code	Description and value of	property Description of del	ribe any property c bts paid in exchan	or payments reçeived ige	
PR	of include gifts and traces. Ses. Fill in the details. Person Who Received Translumber Street	state ZIP Code	Description and value of	property Description of del	ribe any property c bts paid in exchan	or payments reçeived ige	
Property of the property of th	es. Fill in the details. Person Who Received Translumber Street Person's relationship to gerson Who Received Translumber Street	state ZIP Code	Description and value of	property Description of del	ribe any property c bts paid in exchan	or payments reçeived ige	

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 48 of 53

	Cynthia I. First Name Middle	le Name Las	of Name	Case number (if known)	
. With	nin 10 years before yo	ou filed for bankr	uptcy, did you transfer an	y property to a self-settled trust or similar device of which you	
are a	a beneficiary? (These	are often called a	asset-protection devices.)	y property to a self-settled trust of similar device of which you	u
☑ N					
O Y	Yes. Fill in the details.				
			Description and value of t		
				어느님이 들어가 하면 어머니는 그들은 이 사람들이 되었다. 그 아들은 사람들이 나는 사람들이 아들어 가득하다.	transfer made
IN	vame of trust		volter .	**************************************	
			-1.77	TENT PARAMETERS AND	
	NY MESONANA MANANANA MPININGANA NA MBANANA MPININGAN PANGANANA MBANANANA MPININGANANA MPININGANANA MPININGANAN	-ALANO SIMIAN AMBRANI PROPERTY PROPERTY OF THE	WESTERNA AND AND AND AND AND AND AND AND AND A	HI FIRST CONTRACTOR OF THE STATE OF THE STAT	Wildell Advantage
t 8:				eposit Boxes, and Storage Units	
Vithi				counts or instruments held in your name, or for your benefit,	***************************************
lose	ed, sold, moved, or tr	ansferred?	cy, were any manicial acc	counts or instruments held in your name, or for your benefit,	
nclu	ide checking, savings	s, money market,	or other financial accoun	ts; certificates of deposit; shares in banks, credit unions,	
JIOK	erage nouses, pension	on funds, cooper	atives, associations, and o	other financial institutions.	
ZΙΝ	lo				
ΙY	es. Fill in the details.				
			Last 4 digits of account m	umber Type of account or Date account was Last bala	ance befor
			Last 4 digits of account m	Last Date	ance before or transfer
Ĩ	Name of Financial Institution	n	Last 4 digits of account m	instrument closed, sold, moved, closing of transferred	
		n	· 中国的 (1985年)	instrument closed, sold, moved, closing of transferred Checking \$	
	Name of Financial Institution	n	· 中国的 (1985年)	instrument closed, sold, moved, closing of transferred Checking \$	
		n	· 中国的 (1985年)	instrument closed, sold, moved, closing of transferred Checking \$	
ř -	Number Street	n State ZIP Code	· 中国的 (1985年)	instrument closed, sold, moved, closing of transferred Checking \$	
ř -	Number Street	110	· 中国的 (1985年)	instrument closed, sold, moved, closing of transferred Checking \$	
ō	Number Street City S	State ZIP Code	· 中国的 (1985年)	instrument closed, sold, moved, closing of transferred Checking \$	
- -	Number Street	State ZIP Code	XXXX	instrument closed, sold, moved, closing of transferred Checking \$ Savings Money market Brokerage Other	
TO N	Number Street City S	State ZIP Code	XXXX	instrument closed, sold, moved, closing of or transferred Checking \$ Savings Money market Brokerage Other Checking \$ Savings	
TO N	Number Street City S Name of Financial Institution	State ZIP Code	XXXX	instrument closed, sold, moved, closing of transferred Checking \$	
	Number Street City S Name of Financial Institution	State ZIP Code	XXXX	instrument closed, sold, moved, closing of or transferred Checking \$	
	Number Street City S Name of Financial Institution	State ZIP Code	XXXX	instrument closed, sold, moved, closing of transferred Checking \$	
N C C	Number Street City S Name of Financial Institution Number Street	state ZIP Code	xxxx	instrument closed, sold, moved, or transferred Checking Savings Money market Brokerage Checking Savings Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	
N N N C C o yo	Number Street City S Name of Financial Institution Number Street City Si ou now have, or did your on the residue of the second of the sec	state ZIP Code	xxxx	instrument closed, sold, moved, closing of or transferred Checking \$	
No you	Number Street City S Name of Financial Institution Number Street City Si ou now have, or did y fities, cash, or other v	state ZIP Code	xxxx	instrument closed, sold, moved, or transferred Checking Savings Money market Brokerage Checking Savings Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	
ō o yo ecuri	Number Street City S Name of Financial Institution Number Street City Si ou now have, or did your on the residues, cash, or other washes	state ZIP Code	xxxx	instrument closed, sold, moved, or transferred Checking \$	
ō o yo ecuri	Number Street City S Name of Financial Institution Number Street City Si ou now have, or did y fities, cash, or other v	state ZIP Code	xxxx	instrument closed, sold, moved, or transferred Checking \$	
No yo	Number Street City S Name of Financial Institution Number Street City Si ou now have, or did y fities, cash, or other v	state ZIP Code	XXXXXXXXyear before you filed for b	instrument closed, sold, moved, closing of or transferred Checking Savings Money market Brokerage Other Savings Money market Brokerage Other Amoney market Brokerage Other Describe the contents Describe the contents	or transfer
ō ō o yoo ecuri	Number Street City S Name of Financial Institution Number Street City Si ou now have, or did you rities, cash, or other you oes. Fill in the details.	tate ZIP Code tate ZIP Code ou have within 1	XXXXXXXXyear before you filed for b	instrument closed, sold, moved, or transferred Checking \$ Savings Money market Brokerage Other Checking \$ Savings Money market Brokerage Other Money market Brokerage Other Describe the contents Describe the contents	o you still ave it?
Ñ Ñ Ñ Ñ No ecuri No 1 Ye	Number Street City S Name of Financial Institution Number Street City Si ou now have, or did y fities, cash, or other v	tate ZIP Code tate ZIP Code ou have within 1	XXXXXXXXyear before you filed for b	instrument closed, sold, moved, or transferred Checking \$ Savings Money market Brokerage Other Checking \$ Savings Money market Brokerage Other Money market Brokerage Other Describe the contents Describe the contents	o you still ave it?
Ñ	Number Street City S Name of Financial Institution Number Street City S ou now have, or did y ities, cash, or other v o es. Fill in the details.	tate ZIP Code tate ZIP Code ou have within 1	XXXX— XXXX— year before you filed for b Who else had access to it?	instrument closed, sold, moved, or transferred Checking \$ Savings Money market Brokerage Other Checking \$ Savings Money market Brokerage Other Money market Brokerage Other Describe the contents Describe the contents	o you still ave it?
Ñ	Number Street City S Name of Financial Institution Number Street City Si ou now have, or did you rities, cash, or other you oes. Fill in the details.	tate ZIP Code tate ZIP Code ou have within 1	XXXX— XXXX— year before you filed for b Who else had access to it?	instrument closed, sold, moved, or transferred Checking \$ Savings Money market Brokerage Other Checking \$ Savings Money market Brokerage Other Money market Brokerage Other Describe the contents Describe the contents	o you still ave it?

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 49 of 53

ebtor 1	Cynthia I. Porte	Er Last Name	Case number (if known)	
2. Have	e you stored property in a storage	unit or place other than your home within 1 yo	ear before you filed for bankruptcy?	
(Z) (
.	Yes. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you still
	Name of Storage Facility	Name	_	□ No □ Yes
	Number Street	Number Street	_	
		City State ZIP Code	•••••	
	City State ZiP Co	de		
or u	you hold or control any property t iold in trust for someone. No	old or Control for Someone Eise hat someone else owns? Include any property	you borrowed from, are storing for,	
.	Yes. Fill in the details.			
		Where is the property?	Describe the property Va	alue
	Owner's Name		\$_	
	-	Number Street	-	
	Number Street			
	City State ZIP Coo	City State ZIP Code	·	
art 1	Circ Bearly Manual Tree		The active control of the contribution of the contribution and appropriate section of the contribution of	
	purpose of Part 10, the following			
HdZd	iruous or toxic substances, waste	, state, or local statute or regulation concernin es, or material into the air, land, soil, surface w rolling the cleanup of these substances, waste	ater, groundwater, or other modium	
Site	means any location, facility, or pr	operty as defined under any environmental law		
Haza		n environmental law defines as a hazardous w	aste, hazardous substance, toxic	
		ant, contaminant, or similar term. ings that you know about, regardless of when	they occurred.	
		u that you may be liable or potentially liable ur		,
⊠ N		•		
☐ Y	es. Fill in the details.			
		Governmental unit Enviror	mental law, if you know it Date	of notice
m. Al	ame of site	Construction		
N	ame or 2(l¢	Governmental unit		-
Ñ	umber Street	Number Street	$(a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij},a_{ij}$	
_		City State ZIP Code		
c	ity State ZIP Code	MANAGANA.		

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 50 of 53

	Last Name	Case number (if known)	
ave you notified any governmental	unit of any release of hazardous m	atorial?	
ŽÍ No	The state of the s	aterial i	
Yes. Fill in the details.			
and the state of t	Governmental unit	ysky <u>j</u> e jednosti od objekt	en formanist
	Governmental unit	Environmental law, if you know it	Date of notic
Name of site	Governmental unit		
Number Street			
Number Succe	Number Street		
	City State ZIP Cod	e	
City State ZIP Co	ode		
	transfer of the contract of th	the same of the contraction of the same of	
ive you been a party in any judicial	or administrative proceeding unde	r any environmental law? Include settle	ments and orders.
No			
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of th
0			case
Case title	- To Park Lands		
	Court Name		Pending
	Place In the Control of the Control		U On appe
	Number Street	•	Conclud
Case number			
	City State ZiF	² Code	
Give Details About You	r Business or Connections to <i>J</i>	Any Business	
thin 4 years before you filed for ba	nkruptcy, did you own a business o	or have any of the following connections	to any business?
thin 4 years before you filed for bat A sole proprietor or self-emplo	nkruptcy, did you own a business o byed in a trade, profession, or other	or have any of the following connections	to any business?
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership	nkruptcy, did you own a business o oyed in a trade, profession, or other company (LLC) or limited liability p	or have any of the following connections	to any business?
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability	nkruptcy, did you own a business o oyed in a trade, profession, or other company (LLC) or limited liability p	or have any of the following connections	to any business?
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi	nkruptcy, did you own a business of oyed in a trade, profession, or other company (LLC) or limited liability p ng executive of a corporation	or have any of the following connections r activity, either full-time or part-time partnership (LLP)	to any business?
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the	nkruptcy, did you own a business of oyed in a trade, profession, or other company (LLC) or limited liability p ng executive of a corporation voting or equity securities of a corp	or have any of the following connections r activity, either full-time or part-time partnership (LLP)	to any business?
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go	nkruptcy, did you own a business of oped in a trade, profession, or other company (LLC) or limited liability pung executive of a corporation voting or equity securities of a corporation to Part 12.	or have any of the following connections r activity, either full-time or part-time partnership (LLP) poration	to any business?
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go	nkruptcy, did you own a business of byed in a trade, profession, or other company (LLC) or limited liability partial ing executive of a corporation voting or equity securities of a corporation to Part 12.	or have any of the following connections r activity, either full-time or part-time partnership (LLP) poration	
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar	nkruptcy, did you own a business of oped in a trade, profession, or other company (LLC) or limited liability pung executive of a corporation voting or equity securities of a corporation to Part 12.	or have any of the following connections r activity, either full-time or part-time partnership (LLP) poration pusiness. Employer Identifica	tion number
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go	nkruptcy, did you own a business of byed in a trade, profession, or other company (LLC) or limited liability partial ing executive of a corporation voting or equity securities of a corporation to Part 12.	or have any of the following connections r activity, either full-time or part-time partnership (LLP) poration pusiness. Employer Identifica	
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar	nkruptcy, did you own a business of byed in a trade, profession, or other company (LLC) or limited liability partial ing executive of a corporation voting or equity securities of a corporation to Part 12.	or have any of the following connections r activity, either full-time or part-time partnership (LLP) poration pusiness. Employer Identifica	tion number and it is it is a security number or ITIN.
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar	nkruptcy, did you own a business of oped in a trade, profession, or other company (LLC) or limited liability pung executive of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each the Describe the nature of the busing or equity securities.	pr have any of the following connections r activity, either full-time or part-time partnership (LLP) poration pusiness Employer Identifica Do not include Soc EIN:	tion number al Security number or ITIN.
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar	nkruptcy, did you own a business of byed in a trade, profession, or other company (LLC) or limited liability partial ing executive of a corporation voting or equity securities of a corporation to Part 12.	pr have any of the following connections r activity, either full-time or part-time partnership (LLP) poration pusiness Employer Identifica Do not include Soc EIN:	tion number al Security number or ITIN.
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar	nkruptcy, did you own a business of oped in a trade, profession, or other company (LLC) or limited liability pung executive of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each the Describe the nature of the busing or equity securities.	per have any of the following connections are activity, either full-time or part-time partnership (LLP) poration pusiness Employer Identification not include Sociation EIN: eper Dates business existence.	tion number ial Security number or ITIN.
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar	nkruptcy, did you own a business of pyed in a trade, profession, or other company (LLC) or limited liability progression of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each the Describe the nature of the busing the procession of the processi	per have any of the following connections are activity, either full-time or part-time partnership (LLP) poration pusiness Employer Identification not include Sociation EIN: eper Dates business existence.	tion number al Security number or ITIN.
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name	nkruptcy, did you own a business of pyed in a trade, profession, or other company (LLC) or limited liability progression of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each the Describe the nature of the busing the procession of the processi	pr have any of the following connections reactivity, either full-time or part-time partnership (LLP) poration pusiness Employer Identifica Do not include Soc EIN: eper Dates business exists	tion number ial Security number or ITIN. sted
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name	nkruptcy, did you own a business of pyed in a trade, profession, or other company (LLC) or limited liability progression of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each	pr have any of the following connections reactivity, either full-time or part-time partnership (LLP) poration pusiness Employer Identifica Do not include Soc EIN: eper Dates business existers From ness Employer Identifica	tion number ial Security number or ITIN. sted
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name Number Street	nkruptcy, did you own a business of pyed in a trade, profession, or other company (LLC) or limited liability progression of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each	pr have any of the following connections reactivity, either full-time or part-time partnership (LLP) poration pusiness Employer Identifica Do not include Soc EIN: eper Dates business exist From ness Employer Identifica Do not include Socion of the control of	tion number al Security number or ITIN. sted To tion number
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name Number Street City State ZIP Coor	nkruptcy, did you own a business of pyed in a trade, profession, or other company (LLC) or limited liability progression of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each	pr have any of the following connections reactivity, either full-time or part-time partnership (LLP) poration pusiness Employer Identification Dates business existing point include Social From Employer Identification Do not include Social Promises Employer Identification Do not include Social Promises Promises Promises Do not include Social Promises Promises Promises Do not include Social Promises	tion number ial Security number or ITIN. sted To tion number al Security number or ITIN.
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name Number Street	nkruptcy, did you own a business of pyed in a trade, profession, or other company (LLC) or limited liability progression of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each	per have any of the following connections are activity, either full-time or part-time partnership (LLP) poration pusiness Employer Identification on the partnership (EIN:	tion number al Security number or ITIN. sted To tion number al Security number or ITIN.
thin 4 years before you filed for bat A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managi An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name Number Street City State ZIP Coor	nkruptcy, did you own a business of pyed in a trade, profession, or other company (LLC) or limited liability progression of a corporation voting or equity securities of a corporation to Part 12. Indeed fill in the details below for each the Describe the nature of the busing the profession of accountant or bookkers. Name of accountant or bookkers.	per have any of the following connections or activity, either full-time or part-time partnership (LLP) poration pusiness Employer Identifica Do not include Soci EIN: Prom Employer Identifica Do not include Soci EIN:	tion number al Security number or ITIN. sted To tion number al Security number or ITIN.

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 51 of 53

btor 1	Cynthia I. Porter	Name Case number (if known)
	Last	Name
	enterent terretaria general de la companya de la c	Describe the nature of the business Employer Identification number
	Business Name	Do not include Social Security number or ITIN.
		EIN:
	Number Street	Name of accountant or bookkeeper Dates business existed
	ou manufacture and a second se	
		From To
	City State ZIP Code	
enders of the state of the stat		the state of the s
3. Witi	hin 2 years before you filed for bankrup	tcy, did you give a financial statement to anyone about your business? Include all financial
inst	itutions, creditors, or other parties.	10 Jour Jour State and the state of the stat
Z		
	Yes. Fill in the details below.	
		Date issued
	Name	MM / DD / YYYY
		W. 1777
	Number Street	
	City State ZIP Code	
	SECRET	
art 17	2: Sign Below	
I ha	ave read the answers on this <i>Statement</i> swers are true and correct. I understand	of Financial Affairs and any attachments, and I declare under penalty of perjury that the I that making a false statement, concealing property, or obtaining money or property by fraud
111 (connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 3571.	result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
10	11.11.11.	<i></i>
×	Myratore	<u> </u>
	Signature of Debtor 1	Signature of Debtor 2
	Date 7/07/2017	Date
		atement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Ø	No .	Some of Financial Analis for marriagas rining for Bankruptcy (Official Form 107)?
	Yes	
Did	you pay or agree to pay someone who	is not an attorney to help you fill out hankruntcy forme?
Did ☑	you pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy forms?
V	you pay or agree to pay someone who No Yes. Name of person	is not an attorney to help you fill out bankruptcy forms? Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 52 of 53

ebtor 1	Cynthia	I. Porter		er	
	First Name		Middle Name	Last Name	
ebtor 2					
pouse, if filing)	First Name		Middle Name	Last Name	
nited States E	Bankruptcy Cou	rt for the:	Northern District of I	finois	

Check if this is an amended filing

12/15

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

if two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Sch information below.	·	
Identify the creditor and the property that is collat-	eral What do you intend to do with the property the secures a debt?	at Did you claim the property
Creditor's name: Oscar Trejo	Surrender the property.	□ No
THE REPORT OF THE PARTY OF THE	Retain the property and redeem it.	☑ Yes
Description of Automobile property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	□ Surrender the property.	
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	— 165
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	
and the second of the second	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	MANAGEM.
Creditor's name:	☐ Surrender the property.	The No
and the first transfer of the second	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

Case 17-20986 Doc 1 Filed 07/14/17 Entered 07/14/17 10:19:46 Desc Main Document Page 53 of 53

d. You may assume an unexpired	t real estate leases. <i>Unexpired leas</i> I personal property lease if the trust	Executory Contracts and Unexpired Leases (Official Form 106G), es are leases that are still in effect; the lease period has not yet ee does not assume it. 11 U.S.C. § 365(p)(2).
escribe your unexpired personal p	roperty leases	Will the lease be assumed?
essor's name: John Hanson		□ No
escription of leased Apartment Foperty:	Rental	☑ Yes
ssor's name:		N. a.
escription of leased operty:		☐ Yes
ssor's name:	ere (eren en tradicionemente) en estat de la	
escription of leased operty:		Yes
ssor's name:	ramentala fonda qua pera pera ha ha most objeta per un amera neces a ha material del constituente de econo el desta del grocor despaño, esc	
scription of leased		Yes
ssor's name:	MAN Terina Manacat 200 pangan andarang Andreway acamat ana andara dan dan dan dan dan dan dan dan dan da	□ No
scription of leased operty:		Yes
ssor's name:	i in the second more and a second in the second more and a second in the	
scription of leased perty:		Yes
ssor's name:		□ No
scription of leased perty:	meteories (1971), e en en esta esta esta esta esta esta esta esta	Yes
		The second of th
Sign Below		
	t I have indicated my intention of a	It any property of my estate that secures a debt and any